

CANCER CURES

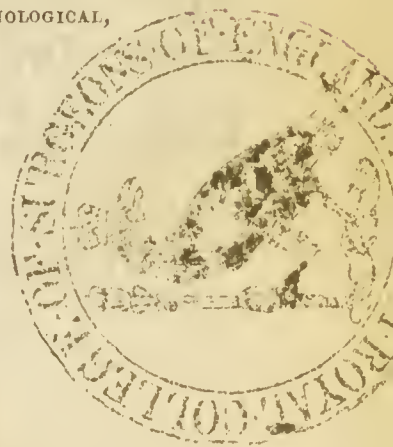
AND

CANCER CURERS.

BY

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JOHN CHURCHILL, NEW BURLINGTON STREET.

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ON the 8th of July, 1857, I delivered the following Lecture on Cancer Cures and Cancer Curers to my pupils in the Surgical Class of the Grosvenor Place School of Medicine. It was published in the *Medical Times and Gazette* of July 11th, 1857, and I now reprint it precisely as it appeared then, adding some further information as to the more recent Cancer Curers, Dr. Fell, the *Docteur Noir*, and the Rev. Hugh Reed, Curate of St. Sepulchre's.

3, UPPER GROSVENOR STREET, LONDON.

January, 1860.

LECTURE.

GENTLEMEN,—So much has been said lately about certain pretended curers of cancer, and so much interest has been excited by trials of a variety of caustics with the hope that they might replace the knife in the removal of cancerous tumours, that I think you should be acquainted with the present state of the question. I shall therefore devote this lecture specially to an account of some of the persons who have been most notorious as “Cancer Curers,” making a few remarks on the relative value of the knife and caustics in the treatment of cancer, and conclude by pointing out such means as may enable you in many cases to dispense with either one or the other.

The cases you now see are, I presume, chiefly in Hospital practice, where you are not likely to meet with the “cancer curers.” I may as well, therefore, give you one or two instances of the sort of cases you may meet with in private. In the year 1853 I was

sent for to see a gentleman well known in the higher ranks of London society. He had a malignant tumour beneath the angle of the left jaw, and his case is so excellent an example of the way in which people with cancer run about, first among the Surgeons and then to the cancer curers, that I will relate it at some length. This gentleman first complained of a sore in the inside of the left cheek. He fancied he had bitten it. Then it was thought that a decayed tooth had caused it, and the tooth was extracted. Then caustic was used. Still it did not get well, and Mr. Fergusson was consulted. He excised the diseased part; a good deal of bleeding followed, and styptics were used freely. Some time after swelling came on beneath the jaw, and Mr. Lawrence was consulted. He said the disease was malignant, advised attention to the general health, and a course of sarsaparilla. Then I was called in. The skin at that time was on the point of giving way. I employed congelation by Dr. Arnott's process. This did some temporary good. It gave relief to pain, and I felt pretty sure that it retarded the growth of the tumour. However, the patient was not content with that, and Dr. Marsden was sent for. He advised a very generous diet. Soon after this the skin gave way, and carrot poultices were used. Then came the turn of the cancer curers. Dr. Pattison was sent for, and had sense enough to see that he could do nothing, but he made the most

of the case, of course, by saying that if he had been called in at first he should certainly have effected a cure. Then a German empiric was heard of who was doing wonders somewhere on the Rhine, and he was written to. He offered to come over for five hundred pounds, and ultimately an arrangement was made to give him three hundred. He came, saw, and conquered—not the disease, but the patient. He applied a very strong caustic one Monday ; on the Tuesday it had destroyed the coats of a large artery, which gave way, and the patient bled to death in a very few minutes.

Every one who has seen much practice in town could tell such stories as these, but one I have heard Dr. Jenner relate is most striking. He was called one morning, seven or eight years ago, to see a lady who was said to have fainted. He found a lady dead in bed, and a cancer curer just about to reapply a dressing upon the breast of the dead woman. This person was so ignorant of medicine that he did not know she was dead ; he was horror-struck when Dr. Jenner told him so, and had just before assured the husband that his wife was going on well, and would soon be cured. The quack was not punished. The husband and friends were ashamed of having been duped, and they kept quiet.

Hume is not the first nor the only philosopher who has remarked how constantly mankind is deceived by

the very same tricks played over and over again. "In spite of all warning, we see one generation after another, with their eyes wide open, walk into the same gulf of fraud, quackery, and imposture." This is especially true in relation to Medicine. Large fortunes have been made by the sale of a single nostrum. Perkins sold thousands of his "tractors" at five guineas a pair. Mesmer, and Deslon his pupil, magnetized many thousands of pounds into their pockets. The fortunes made by Mayersbach and Schweinfurth in London in the last century were splendid, and at the present day more than one empiric has the art of attracting crowds from every part of Europe to some obscure German village. Some of these people may not do much absolute harm, but we are not without instances of victims to quackery in every class of life. Horace Walpole gives us a list of several distinguished sufferers. "Sir Robert Walpole," says Horace, "was killed by a lithotriptic medicine; Lord Bolingbroke by a man who pretended to cure him of cancer in the face; and Winnington died some time after, by the ignorance of a quack who physicked and bled him to death in a few days for a slight rheumatism." There is no man now in large practice who could not add to this list some victim of the quackish follies of the day; and it becomes our duty to inquire why the public are so apt to think favourably of those who profess to possess secret

remedies for diseases which are considered by regularly educated members of the Medical Profession to be incurable.

Now there are various reasons for the success of empirics ; but the principal reason is, that in many cases where honest men give no hope, the quacks promise health and life ; and the patients, like drowning men, catch at every twig and shadow. Then there is the love of novelty, and the benevolent desire to promote anything which promises to relieve pain or save life ; and an English feeling of giving fair play to everybody, and not allowing any class of men to exercise a monopoly of the healing art. Then self-love comes into play. People are apt to be led away by confident assertions ; they espouse a scheme warmly, and say so much in its favour, that when the bubble bursts they find it difficult to confess their error. When the imposition is discovered, the partisan is ashamed of having been duped, and holds his tongue. Even those who have suffered both in health and pocket think it better, for the sake of their own reputation as sensible people, to keep quiet. Probably such reserve would be less frequent, if it were considered that others suffer from a perpetuation of the delusion, and the deceptions would be acknowledged as soon as discovered. This duty, however, is overlooked ; for while actions for malpraxis are not unfrequent against Medical

men, it is rare to find an empiric arraigned. Yet the late Lord Gardestone took the trouble to inquire for a number of persons who had actually attested marvellous cures, and found that more than two-thirds of the number "died very shortly after they had been cured;" and I shall show you presently that we are not without similar results of equally marvellous cures in our own day. I think this should teach us all a lesson. We have chosen the profession of Medicine. It is our duty, our business, to study how to cure disease; and we ought never to look upon any disease as incurable, never to give up any case as entirely hopeless; for "the extinction of hope is the extinction of endeavour." Let me impress upon you, then, the duty of looking upon diseases commonly considered incurable in a more hopeful spirit,—regarding them only as incurable because our art is imperfect, and of searching diligently for a remedy which may remove the imperfection. We may thus keep hope alive,—we may alleviate where we cannot cure, soothe where we cannot save; and even if the patients are not directly benefited, their indirect gain will be great if they be preserved from the snares of ignorant impostors.

There are some special reasons why, of all the different classes of empirics, the "cancer curers" should attract a large share of public attention. Cancer has been too generally treated and regarded by

Medical men as incurable, and the frequency of the return of the disease after the removal of a cancerous tumour by the knife is confessed by all honest men. Then there is the natural fear of the knife ; and, on the other hand, the bold assertions and confident promises of the cancer curer. These persons all tell the same story. They exaggerate the pain and danger attending excision ; they endeavour to persuade the public, and even their patients, that the use of their caustics is not attended with much pain, and with no loss of blood. They call innocent tumours cancer. They conceal unsuccessful cases : so do those who are ashamed of having been imposed on ; and Medical men will not incur the charge of jealous rivalry by making them known. Lastly, they assert that, while relapse is the rule after excision, it is the exception after the removal by their caustics ; and they have a theory, which looks plausible enough to the public, explaining why this should be : they say they remove the roots, which the knife does not.

This notion of the *roots* of cancer leads me to say something about Plunket and Guy, cancer curers of the past century, who adopted it—just as it has been adopted by two American Physicians, Dr. Pattison and Dr. Fell, who have treated cancers by secret remedies in London for some years past. The notion is that their applications not only destroy the tumour

itself, but penetrate, by a sort of intelligent power or elective affinity, in certain directions corresponding exactly with these supposed roots of the cancer—eating away or drawing out those roots, without affecting the sound flesh into which they are ingrafted. On removing such tumours, they show filaments of hardened cellular tissue, or portions of subjacent muscle, keeping up the connexion; and on the tumours they preserve in bottles, they show similar prolongations, or shreds, hanging into the spirit in which the tumours are preserved. These are, in all probability, merely portions of the surrounding tissues which have been destroyed by the action of the caustic. Possibly these supposed roots may have given rise to the term “cancer,”—the crab holding firmly with its claws the prey it had grasped. However this may be, you can see at once how likely such reasoning is to affect the imagination of patients.

Plunket practised as a cancer curer in London in the early part of last century. He is said to have known little or nothing of surgery in general, and to have practised from the traditionary directions of his namesake, formerly an empiric in Ireland, who left the receipt for his medicine, with directions for its use, to Steevens’s Hospital. Guy, who was a member of the “Corporation of Surgeons,” purchased the secret of Plunket about 1754, and in his

account of the medicine says it had been known by the name of "Plunket's Poultice," and had been used by Plunket and his ancestors for more than a century. A controversy took place between Guy and Gataker, and in the *Lloyd's Evening Post*, March 5th, 1760, old Plunket gives his own receipt, as follows:—

Crow's-foot, which grows in low ground, one handful ;	} well pounded.
Dog fennel, three sprigs ;	

Crude brimstone, three middling thimbles-full.

White arsenic, the same quantity. All incorporated well in a mortar, then made into small balls, the size of nutmegs, and dried in the sun.

Sir Charles Blicke, with whom Abernethy served his apprenticeship, used Plunket's caustic very much in the treatment of cancerous sores, and his pupils used to be employed in gathering ranunculus and dog fennel, and making them into the paste.

It is curious to remark how imitative even great discoverers may be. The escharotic effects of arsenic had been known to the Greek and Roman Physicians—they had not been forgotten in the Middle Ages. The mineral had been used for centuries in the removal of cancerous diseases. Plunket adds some crow's-foot and dog fennel to it, and becomes a great cancer curer in London. The chloride of zinc is proved to be an excellent caustic, by Hancke, Can-

quoin, Alexander Ure, and others. They even use it to remove malignant growths. Dr. Fell adds some *Sanguinaria canadensis* to it, and four gentlemen of the very highest character and professional position, expressing no disapproval of the use of a secret remedy, and without trial of the unaided powers of the vegetable, publish a certificate on Dr. Fell's "mode of treatment," complimenting it as "ingenious, safe, and easy of application."

It was Guy's caustic, or rather the Plunket's paste, that killed Lord Bolingbroke, and many others were poisoned by the local use of arsenic; yet this did not prevent Lord Arundel from buying the receipt of the wife of a blacksmith, so ignorant that she could not sign her name, but a noted cancer curer, named Elizabeth Fellow. This was long known as Lord Arundel's Cancer Cure. It was an arsenical powder, and a wash of corrosive sublimate, and no doubt killed a great number of poor women. However, like Plunket's paste, a great many cancerous, and other tumours, were removed entire by it; and Mr. Justamond, who was Surgeon to the Westminster Hospital some seventy or eighty years ago, tried them both very extensively, arriving at the conclusion that the advantage gained did not compensate for the risk incurred. It is curious to find how Mr. Justamond anticipated much that has been going on in London during the last three or four

years by cancer curers, and it may be worth while to read you rather a long extract from a pamphlet he published in 1780, giving an account of his experiments.

After describing various methods he had used without success, he mentions a case in which he resolved to attempt extirpation by the arsenical caustic. "My patient was extremely timorous, and would by no means be persuaded to submit to the operation by the knife. She had a very hard stubborn schirrhous in the right breast, just above the nipple, of the size of a small apple, and beyond this, a small indurated gland under the axilla. The arsenical preparation I used in this case was composed of one-third of antimony and two-thirds of white arsenic, fused together. This being reduced into impalpable powder, a few grains of it were mixed with as much powdered opium. But as the skin was entire, and as I knew the arsenic would not act through the cuticle, the day before this powder was applied I rubbed the whole surface of the gland gently with the lunar caustic. By this contrivance the cuticle was easily separated next day, when, mixing a small quantity of the powder with part of the yolk of an egg, so as to bring it to the consistence of an ointment, I spread this upon a pledget, cut to the size of the gland, and applied it to the whole surface. The pain was very great for the first four-and-twenty

hours, but after that subsided. I left this first dressing on for several days, when seeing it ready to drop off, I removed it, and found that all that part of the skin on which the caustic had been applied was cracking all round, and the tumour beginning to separate. In expectation of facilitating this separation, I made a few scarifications on the destroyed surface, and filled the crevices with more of the powder, applying over it a pledget of the same kind as the former. But this second application did not, as I imagine, produce any effect, for it caused no pain. I then waited a few days to observe what would happen. The separation began to take place more evidently at the edges, which now looked florid, though the tumour did not yet seem ready to come away. To hasten this event, I judged it proper to put some of the powder all round the separating edges, and as low down as it could be insinuated between the diseased gland and the sound skin. I soon found that this contrivance had its effect, for the pain it occasioned was more violent than that produced by the first dressing. I was, however, obliged to repeat the application of the powder to different parts of the edges at intervals, but never in so large a quantity as before. By this method the separation of the tumour was effected in little more than two months, and the gland came out as entire as a nut out of a shell, or as if it had been cleanly dissected with a knife. The

small gland under the arm-pit I had put nothing to, thinking it would dissolve by the suppuration of the larger one, but in this I was mistaken. It still remained, but this circumstance did not prevent the wound made by the separation of the larger gland from healing very fast after it had come out." Mr. Justamond says he saw this patient a year and a half afterwards in perfect health. He explains the separation of the diseased gland from the surrounding parts by the action of the arsenic on the sound skin when deprived of its cuticle, "bringing on inflammation and suppuration in the cellular membrane all around and underneath the diseased gland, which is thus forced out entire, and unaffected by the caustic;" and he adds, that if any one wish to separate the whole gland at once, "he must extend the application all over the indurated part, after having deprived the surrounding skin of its cuticle, either by a blister, or by the method made use of by me in the above instance, which I think preferable, as being less irritating. Perhaps it may hereafter be found only necessary to make a circle round the whole tumour for the application of the arsenical caustic."

So you see the modern cancer curers have not taught us anything new. They have not taught us how to remove cancer by caustics. They have not taught us to discard arsenic. We had done that long ago, except in those cases of small superficial malign- 4

nant ulceration, in which, in a dilute form, it is still the best remedy known. They have not given us any new caustic, and it remains to be seen whether they can show that their caustics, as prepared and used by themselves, have any advantage over the knife. To settle this question we cannot do better than examine the results of the cases of Landolfi, Pattison, and Fell, as recorded by themselves.

Landolfi, a Neapolitan Physician, may be looked upon as the Prince of the cancer curers. He has been decorated with orders of knighthood by sovereign princes, has been alternately flattered and abused, and has made an immense fortune. He made no secret of his plan. "Landolfi's paste," as his caustic was called, was composed of equal parts of the chlorides of zinc, bromine, gold, and antimony, made into a paste with flour or liquorice powder. Sometimes he used the chloride of bromine alone, using it both externally and internally; and when the slough had been formed, he used lettuce poultices till it separated. There can be no doubt that Landolfi removed an immense number of cancerous tumours by his paste in Italy, Germany and France, and that healthy granulations sprung up, and firm cicatrices very often resulted. He used to assert that out of four thousand cases of cancer he had treated, the disease had not recurred in three thousand. This is what he *said*. He never offered anything like

proof of the truth of this statement; and when his caustic was tried in the Hospitals of Vienna and Paris, the conclusions arrived at were, that it was decidedly inferior to the chloride of zinc. Landolfi went himself to Paris, and a number of patients were treated by him in the Salpêtrière, under the inspection of a committee of Hospital Surgeons. Their report was published, and my colleague, Dr. Deville, has just favoured me with a copy. The conclusions are, that the chloride of bromine, which is the only peculiarity in Landolfi's treatment, is quite useless as an internal remedy; and that locally it only acts as a blister, raising the epidermis, and exposing the denuded part to the action of the chlorides of zinc and antimony; acting, you observe, just as the ranunculus did in Plunket's paste, the nitrate of silver as used by Justamond, or like any common blister. The committee reported that the pain produced by this caustic was excessive, and that it did not secure the patients from the danger of erysipelas or hæmorrhage. Landolfi does not appear to have been more successful in Germany than in France. In November, 1853, he was called to the reigning Duchess of Anhalt-Cothen to remove a cancer of the breast. In January, 1854, Dr. Brunn, a member of the Superior Medical Council of the Duchy, published a pamphlet on Landolfi and his method, in which he announced his success as complete; yet on the 13th of July, 1855,

the Duchess died of a return of the cancer of which Landolfi had cured her. Other cases treated at Cothen and Munich died or relapsed. He treated Dr. Seyfert at Dresden, and he died. He treated a Prince of Prussia, and was decorated with the order of the Red Eagle; but here again *cure* meant *cicatrization*; for I have been assured that the disease was cancrioid of the face, and that it has returned. Dr. Valentini of Berlin tried the method in 43 cases, and published an article in July, 1854, in its favour; but in July 1855, only one year later, he wrote to say that it had entirely disappointed him. So at Vienna, in October 1854, Dr. Weinberger published reports of 33 cases treated before him by Landolfi. One of the cases reported as cured relapsed while Dr. Weinberger was correcting his proof; and ten months later he wrote, that in cases of medullary cancer the disease "always returned, even before the cicatrization of the wound," and that the internal use of the chloride of bromine had no influence whatever in preventing relapse. Landolfi by ministerial authority *selected* six cases himself at the Vienna Hospital, and treated them under the observation of a Committee, yet he only cured one, and that was an innocent tumour, a partial hypertrophy of the mamma, for which he destroyed the whole breast quite unnecessarily, and produced a large unsound cicatrix. He wrote to the French Commission to say that the

effects of the application of his caustic in France were in all respects similar to those he had obtained in Germany and Italy; and so we find them. Of nine cases of cancer of the breast treated by Landolfi himself at the Salpêtrière two died; in four the disease was aggravated; and in the three in which cicatrization took place the disease reappeared. Not one of the nine was cured. He treated three cases of cancrioid, and cured one. In a second the disease reappeared after cicatrization, and in a third it was much aggravated. So much for the three thousand cures of four thousand cases. Well may the French committee add that Landolfi's method "adds another to the illusions that so abound in the history of cancer."

Dr. Pattison, as you may be aware, some three, four, or five years ago, occupied much the same position in London that Dr. Fell does now. Both are Physicians with American diplomas, who have professed to cure cancer by secret remedies, who have treated a great many patients, and have published accounts of their treatment. The difference between them is, that Dr. Fell has at length made known the composition of the remedies he employs, while Dr. Pattison has not; although it is pretty generally believed, and not without ground, that the essential part of his preparations was the dried sulphate of zinc, which Dr. Simpson showed in the *Medical Times*

and Gazette a few months ago was a most useful caustic. Dr. Pattison has not been heard of so much since the arrival of Dr. Fell. Indeed, the disappearance of one and the advent of the other are supposed not to have been altogether without concert. Where Dr. Pattison may be now, I cannot say, but his publications remain; and I can tell you something about some of the cases he has treated. A report of one of these used to appear in the form of a declaration sworn before the provost of Glasgow, that the patient was cured by Dr. Pattison, after having been regarded by Mr. Syme of Edinburgh as hopeless. Mr. Syme informs me that the patient was a small farmer, who had a sore at the corner of the nose. Mr. Syme applied the chloride of zinc to it, but the man went to Dr. Pattison, and so far from having been cured by him "died in great misery after several journeys to London." Mr. Syme informs me that a case of cancer of the breast which had returned after operation, and which Dr. Pattison boasted he had cured, is not cured, but that the lady is dying; and that another lady, upon whom Mr. Syme declined to operate for cancer of the tongue, died under Dr. Pattison's care. These are cases which the public never hear of, but which really ought to be made known. In 1855 a book appeared, entitled "Cancer; its true Nature, Treatment, and Cure. Illustrated by Cases. By John Pattison, M.D., 31, Lower

Grosvenor-street.” Most of these cases are given so indefinitely—as “Mrs. H., from Essex,” “Mrs. J., aged 54,” “Miss ——, aged 27,” “Mrs. A. of Hammersmith,” “D. C. from Scotland,” and so on, that it is impossible to find out how far the cures related are correct: but there is a clue to some of the cases, particularly to those treated at Glasgow; and I wrote to Dr. Macleod, a most able Surgeon of Glasgow, to ask him to make inquiries about them. Here is his reply:—

“The following is the result of the cases treated by Dr. Pattison in this neighbourhood, of which I have been able to find out the particulars:—

“1. David Wilson, nursery gardener, &c.—This was a case of cutaneous cancer of the cheek,—the sore being about the size of a sixpence. Dr. Laurie applied the actual cautery twice; after which it healed for a short time, and again broke out. Pattison treated him, in 1852, for six weeks, during most of which time he was put to great agony,—the caustic being applied, at one time, continuously for eight days. He was pressed to submit to it, in order to see ‘whether a caustic which had been so effectual in America, would act in the same way in this country.’ The sore healed up after this, and has remained well till lately, when the old lancinating pain has returned, the hardness (which had never left it) has increased, and the inner end of the cicatrix has begun again to

ulcerate. The man himself says he is sure he is going to have a return of his disease, and acknowledges that 'the cure' has entirely failed.

"2. Miss M., of 28, Parson-street.—It is eight years since she first observed a small pimple on her right cheek, which remained long small and painless. It was hard, but quite superficial. About two years after its first appearance, it broke and 'wept.' It was many times healed by Dr. Ritchie, by simple means. Having again appeared, she put herself, four years ago, under Dr. Pattison's care. It was then 'no larger than a herring-scale, and felt, when she bent down, as if it would drop out.' Dr. Laurie had seen her just before this, and had told her to have two decayed teeth drawn. This she did, but hearing immediately afterwards of Dr. Pattison, she did not wait to see the result of Dr. Laurie's recommendation, but put herself at once under the charge of Dr. P., who told her it was lupus. The sore had all along remained quite small and superficial—had not spread, and caused hardly any uneasiness. She was in London, under Dr. P., for seven weeks, and was apparently cured. Caustics were very frequently applied, and she was told that 'a very large bad lump had been took away.' She came down to Glasgow, and in fifteen months afterwards she was as bad as ever. She returned to London, and was seventeen weeks under Pattison,

who ‘again took away a great mass of disease.’ The sore caused by the caustic healed, and there has, up to this time, been no return. The cicatrix on the right cheek is as large as a florin, white and sunk. There is no hardness, or any breach of surface. Dr. Ritchie says that the sore was ‘suspicious’ when under his care, but he would not have pronounced it ‘malignant.’ It was very superficial; and the description given by the girl herself, that it was a ‘weeping pimple,’ seems the best which could be given of it.

“3. Mr. Lauder, foreman in a manufactory here, I can hear nothing of.

“4. Mr. C., auctioneer, was a case similar to that of David Wilson. He was twice operated on by Dr. Laurie, and on the re-appearance of the disease, fearing another operation, he went to Pattison. He was twice under this gentleman’s care—once in 1853 for three weeks, and again in 1855 for two months. The disease, which was very limited, in a great measure, though never completely, disappeared after his first visit to London, but in a few months after it again came back worse than ever. He was at that time put to so much pain, that ‘he thought he would have died.’ In 1855 he was again treated by Pattison: the disease knew no amendment, and it is now spreading, though slowly, and he is about to submit himself to more legitimate interference. This

patient has dissuaded many others from going to Pattison.

“5. Miss P., of Glasgow, had been three times operated on with the knife. Had the disease—a cancer of the breast—temporarily removed by Pattison, in 1853. It returned in the spring of 1856, and has been now eight months under Pattison’s treatment, where she still remains, ‘daily getting worse’ (so say her friends).

“6. A sister of this lady’s lately died under Pattison’s care; but from what I can learn, she was in so advanced a stage of cancer of the tongue when he saw her, that her death by no proceeding could have been long delayed.

“7. Mr. R.—Lupus of the nose, said to have been treated by Mr. Lyon, of Glasgow. Mr. Lyon knows nothing of this case, nor can I hear anything of it.

“8. Mrs. W.—‘Ulcer of the leg, of five years’ standing; attended by Dr. Gairdner, of Glasgow, cured by Pattison.’

“This was a common varicose ulcer of the leg, for which Dr. Gairdner could not persuade the patient to lie up for a day. She put herself under Pattison for some months, in London, and followed all his instructions, of which rest was the chief. She came home well, and remained so for a time. The ulcer again appeared when she became pregnant, and it

is again nearly as bad as when she was under Pattison."

I am sure, gentlemen, I need not trouble you more with Dr. Pattison's cures. I have made inquiries myself about others, and I have only found *one* in which the cure was permanent, and that was a case of a small superficial sore on the face, possibly malignant, possibly not.

I do not mean to say much about Dr. Fell. His position is somewhat peculiar; for though he used a secret remedy, he was very open in exhibiting its effects to Medical men, and he has lately made known its composition, in compliance with an agreement entered into with the Surgeons of the Middlesex Hospital, in a book he has recently published. In his preface he talks of the "gratitude of a multitude of cured patients;" but, as the treatment of the earliest case he has recorded as treated in England was commenced July, 1855, and the lady died with pulmonary complication in the following April, and the other cases are of much later date, it is obviously absurd to talk of *cures*, when only a few months have elapsed after cicatrization. I know of cases in which the disease has returned after removal by Dr. Fell himself, and that in a much shorter period than two years; and, looking upon the essential part of his treatment to be the local use of chloride of zinc, it appears to be most unlikely that the results will differ

from those obtained by Canquoin and others by the use of the same caustic. The report of the Surgeons of the Middlesex Hospital was drawn up within two months after the treatment was commenced there. I may tell you that Dr. Fell has not published all his formulæ in his book. At the Middlesex Hospital he uses an ointment containing snuff and acetate of copper, and another made by boiling stramonium leaves in lard; but the chloride of zinc is the caustic by which the tumour is destroyed; the sanguinaria and cochineal added to it are probably of nearly equal efficacy, and the after-dressings of comparatively little importance.

All this leads to the very important question of the relative advantages of the knife and caustics in the treatment of cancer. The advocates of caustics say that when the morbid growth is removed by the knife, if it be really cancer, there is almost certain to be a recurrence of the disease within two years, either in the cicatrix or in some other part of the body; that the disease makes more rapid progress than when the patient is left alone, and therefore that he is in a worse position than before. They say, further, that it is often impossible to remove every particle of diseased tissue with the knife; and that the operation itself is sometimes fatal, either immediately from shock, or indirectly from pyæmia or exhaustion.

On the other hand, the opponents of caustics say

that no caustic can do more than the knife towards removing the cancerous diathesis. They admit that the morbid local growth can be removed, but they assert that the patient is not in a better position, frequently in a worse position, than if the knife had been used. Under the influence of chloroform, the tumour may be removed in a few moments without suffering to the patient, and every portion of diseased tissue can be removed if proper care be taken; while the action of caustic is very slow, often excessively painful, and is sometimes apt to extend beyond the diseased to the healthy surrounding structures. They add, that during the operation of the caustic the patient is not free from the danger of hæmorrhage, erysipelas, or pyæmia, and that the general health is very apt to suffer from the long-continued pain and local irritation.

Now, I am disposed to look upon all these arguments as quite secondary to the great question—which mode of removing the tumour is most likely to be followed by relapse. The advantages and disadvantages of the two methods are pretty equally balanced in other respects; and I apprehend we shall find them, even in this respect, also pretty equal. Statistics collected with a good deal of care show, that about eight cases out of every ten operated on by the knife return within two years. Dr. Fell says that only three out of ten treated by him return within

the same period. One good effect of the trial given to his treatment at the Middlesex Hospital will be, that the truth of this statement will be tested. At present you must take it for what it is worth. Landolfi said something of the same kind, yet I have given you the results he obtained at the Salpêtrière. Pattison harped on the same string, and I have shown you how far he succeeded in preventing relapse. As to Plunket and Guy, and those who used arsenic, I need only remind you of the fact that their remedies have fallen into disuse, although they were employed long enough to establish their reputation all over the world, had they really possessed the powers attributed to them of curing cancer.

But you may say this is not a cheering prospect. If neither the knife nor caustics are to be trusted in,—if the chances are five to one in favour of a return of the disease, or a re-appearance in some other part of the body within two years after we remove a cancerous tumour from any part of the body by either of these methods,—if Surgeons and cancer curers are equally unsuccessful—what are we to do?

In attempting to reply to this, let me give you the rule at which I believe our best and most experienced Surgeons have arrived as to the use of the knife. It is, not to use it in the early stages of

cancer,—not to use it unless the cancer is actually ulcerated, or growing so fast that the skin is about to give way. In such cases, especially where an open cancer gives great pain and is wearing away the patient by bleeding or profuse fetid discharge, the knife is used in the hope of relieving suffering, and prolonging, not saving, life. In some other cases, where a cancer causes great mental anxiety to a patient, you may remove it at her earnest entreaty, after explaining fairly the danger of relapse. I should speak here of the knife and caustics in the same terms, as in many cases it will not much signify which you select. In some cases, where the situation of the growth is such that the knife cannot be used safely, caustics are decidedly preferable. In others, again, where time is a great object, you would choose the knife. It is sometimes a good rule to leave the choice to the patient, representing fairly the advantages and disadvantages of the two methods. If you decide upon using caustic, I think all the evidence before us goes to prove the chloride of zinc to be the most effectual and safest yet employed; that it is a matter of great indifference whether it is employed as a paste or in solution; but that its action is considerably hastened by scoring through the slough, as Justamond did, down to the living tissues beneath, so that they are not protected by the slough from the action of the caustic. This scoring is

not so necessary when the chloride is used in solution as when it is used as paste, after destroying the skin by nitric acid; and it is not at all necessary, if you use a pair of galvanic plates as your caustic. If you place a piece of zinc on any raw surface, and a piece of silver near it, connecting the two by a silver wire, the part covered by the zinc is destroyed very rapidly, and the slough formed is a very soft one, which is easily sponged away. I saw a case of cancer of the breast in a lady in 1854, with Dr. Lawrence, of Connaught-square, in which we decided, on consultation, to adopt this method, and Dr. Lawrence carried it out most effectually. I should not be at all surprised to hear that the next great empiric who appears in London will profess to cure cancer by galvanism.

Looking, therefore, upon both the knife and caustics only as the means of removing cancerous growths under certain exceptional conditions, what are we to do in the early non-ulcerated stages of cancer? This opens a very wide subject, which it is quite impossible to treat in a single lecture; but I must point out to you that we can do a great deal more towards arresting, even curing cancer, than is generally believed—that our art is not nearly so powerless as charlatans assert. Growths, with all the characters of cancer, have occasionally disappeared under the influence of remedies; others have remained completely dormant

for many years, without affecting the health or shortening the life of the individual ; and it is absurd to say that the disease was not cancerous in such cases because the patient recovered, or lived to old age unaffected by the local condition.

In the first place, in the treatment of cancer, the hygienic measures I have often spoken of as so necessary in the treatment of all chronic diseases, are of paramount importance. Plenty of good wholesome food, a well-drained, well-ventilated house, pure country air, extreme cleanliness of person and clothing, sufficient exercise, clothing which exerts no injurious pressure on the diseased part, with mental occupation and amusement, will do a great deal towards the formation of healthy blood, the deposit of healthy tissues from it, and the removal of effete matter or formations of a low aplastic character. Ordinary medical treatment cautiously adopted may assist the hygienic treatment very materially. Deficient action of skin, kidneys, or digestive organs, may be corrected. Alkalies given with or after meals often relieve a kind of digestive derangement common to cancerous patients. Hence the use of Vichy water and carbonate of soda. Pain may be alleviated by opiates or hemlock. Some of the preparations of iron often act admirably in improving the general health. Well-marked cancerous tumours have diminished in size and become quite dormant under the use of iodine in

combination with iron ; and the iodide of arsenic, in doses of one-sixteenth to one-twelfth of a grain twice a-day, has been used with excellent effect since it was first recommended by Dr. A. T. Thompson and Dr. Walshe. The remedy, however, which I have found most useful is the bromide of potassium with cod-liver oil. Given in doses of five to ten grains of the bromide, with one, two, or three drachms of the oil, three times a day, the effect upon the local tumour and the general health is really remarkable. The pain very speedily diminishes. There is, first, a cessation in the growth of the tumour, and then a process of shrinking goes on, while adherence to the surrounding parts is lessened, and a tumour which was firmly united to the surrounding parts becomes moveable, detached as it were, and is felt like a hard, moveable, senseless ball beneath the skin. The last cure for cancer advertised in London is the inhalation of oxygen ; and Dr. Birch has published a pamphlet about it in connexion with an apparatus sold by a firm in Regent-street. This, if it is not likely to do much good, can hardly do harm.

As to external remedies which may be looked on as curative, all attempts to affect the nutrition of the part by the application of leeches or ligature of nutrient arteries must be abandoned as useless. Friction, percussion, and palpation, so much used of late by certain *rubbers* of Edinburgh and Brighton,

with the hope of procuring absorption, are complete failures. Electricity and galvanism have been tried, but the results do not say much for their efficacy. The local means which really have some good effect in cancerous tumours are preparations of lead, iodine, and bromia. Lead in the form of plaister or embrocation is a most soothing application. I have seen it used very largely at the Cancer Hospital in both forms, and with very excellent results. The embrocation in common use there, consisting of equal parts of the liquor plumbi, almond oil, diluted acetic acid and water, is a really useful application, allaying pain, and apparently hastening the absorption of the tissues around the tumour, indurated by inflammatory infiltration. Frictions of solutions of iodide of lead, or iodide of potassium in glycerine, without producing any irritation of the skin, appear to be active promoters of absorption. The iodide of lead was recommended long ago by Dr. Walshe, and is much used now by Dr. Fell. The solution of bromide of potassium in glycerine appears to be even more efficacious, but on this point I do not like to speak confidently without more extended experience.

Dr. Arnott's freezing process is really of great service. I have shown you how to apply this on a former occasion, so that I need only say now that it is a remedy of very great value in the treatment of cancer; that it allays pain, checks growth, and has

reduced many large adherent tumours to a small, movable, indolent condition.

Then mechanical treatment is often very useful in non-ulcerated cancer. It has long been believed that the nutrition of any part of the body might be lowered, and absorption of any product of disease promoted, by methodical compression. Bayle first recorded twelve cases of cancer as cured by compression, out of nineteen. It was tried at the Middlesex Hospital, and Sir Charles Bell reported favourably upon it so far as to the power of alleviating pain. Mr. Travers has known tumours "gradually reduced, and at length absorbed, by equal and persevering compression." Récamier, out of 100 cases, reported thirty as cured by compression alone, and twenty-one considerably relieved. Bayle, as the result of 127 cases, gives seventy-one cured, twenty-six improved, and thirty failures. Some of these cases were probably not truly cancerous, but others undoubtedly were, and in some the stage of ulceration had commenced. From what I have seen myself, I can quite believe that these statements of the good effects of compression are not exaggerated. But it must be properly applied. The plan of bandaging the mamma and shoulder is very objectionable, as it interferes with the free motions of the arm and chest, so necessary to the general well-being of the patient. As a means of producing equal constant

pressure, exact in degree and easily moderated or increased, nothing equals the air-truss invented by Dr. Neil Arnott. An air-cushion, supported by a shield, is adapted to the diseased part, while a spring supported by a belt is arranged to act on the cushion in such a manner that any desirable amount of pressure can be kept up, without interfering in the least with the free motions of the chest. Applied at first so as merely to support the part, and then to exercise gradually increasing pressure upon it, the results are very remarkable. The pain very soon ceases, the swelling in the surrounding parts diminishes and disappears, the large tumour splits up into several smaller divisions, and in some cases entirely disappears, not a trace of any tumour or induration remaining, while in other cases the remaining swelling is quite passive, painless, and innocuous. I saw a lady a few weeks ago with a small tumour like a walnut in her breast, quite harmless and not causing the least anxiety, which I saw nine years ago under this compression treatment, and it was then to all appearance a large cancerous tumour, on the point of ulcerating. I have not the least doubt that if the tumour in that case had been removed, either by the knife or by caustic, the patient would have been dead seven or eight years ago.

When ulceration has taken place, there are a number of local applications which are of great use.

Supposing you have decided not to use either the knife or caustics, your object is to allay pain, arrest bleeding, destroy the fetor of the discharge, until spontaneous separation of the cancer takes place, and then to promote healthy granulation and cicatrization. In some cases of open cancer Dr. Arnott's freezing process acts admirably. It may cause pain for a few minutes, but it gives great alleviation for several days afterwards, and sometimes it destroys a large portion of a morbid growth as effectually as any caustic. This occurred in a case I saw lately with Dr. Brinton. The case was a most unpromising one, in a lady from the country. One breast had been removed, the disease had recurred in the cicatrix, and the subjacent costal cartilages were implicated. There was a large flabby convex growth, which we agreed to congeal. This was done by a most intelligent practitioner in the country, and I hear from him that three-fourths of this growth were destroyed, leaving a small, concave, granulating sore. If you adopt this plan, you must protect the raw surface from the irritant action of the salt by a piece of goldbeater's skin.

The bleeding which takes place from the surface of an ulcerated cancer can always be checked by the perchloride of iron. I always keep this by me, as it is prepared in Paris at the specific gravity of 45° Beaume. A piece of lint, wet with this solution,

will instantly stop any ordinary bleeding; but at this strength, or even at 30° , it acts as a caustic, so that, except in cases of very free bleeding, it should be kept at hand of the strength of 15° , so that the patient or her nurse may apply it. The strength of 30° is that usually employed to coagulate the blood in nævi and varices, and I now show you the remains of a cancerous tumour which has been acted on by this solution. See how friable it is, like dry rotten leather.

About five months ago I injected some of this solution into an encephaloid tumour growing from the ilium. It was then as large as my fist, and growing rapidly. I injected it by four punctures, and the result was immediate hardening and subsequent shrinking. I saw the man a few days ago, walking about in very fair health. I do not wish to say much more about him at present, than that I feel certain his life has been prolonged. I am making other trials with the perchloride of iron, and Dr. Marsden has begun to use it at the Cancer Hospital, but I do not wish to recommend it further now, than as a means of stopping bleeding.

Dr. Marsden thinks very highly of carrot poultices. Their application is rather painful, but they certainly arrest fœtor, and seem to hasten the separation of the diseased part. They are said to have been introduced into use in 1766 by Sultzer, and they have certainly

maintained their reputation longer than most of the remedies for cancer.

If, after a cancerous tumour has separated, you have an indolent granulating surface covered with an unhealthy fetid discharge, a lotion of chlorate of potass is often very useful, of the strength of five to ten grains to the ounce of water. Mr. Weedon Cooke adds a little hydrochloric acid to this, and he believes with advantage.

In any of the stages of ulcerated cancer, when there is much pain, you may use some sedative ointment spread on cotton-wool. A little morphia with lard answers as well as anything; but if you like to try other sedatives, there is no objection to stramonium or tobacco ointment, or hemlock or lettuce poultices. However, you will generally find pain allayed more effectually by opium given internally than by any local application; and of all the preparations of opium I think the one which can be continued for the longest time, and causes the least derangement to the stomach, is the solution of bimeconate of morphia, as prepared by Mr. Squire.

In cases of canceroid of the neck of the uterus, the epithelioma uteri, a disease very often seen at the Samaritan Hospital, Dr. Simpson's paste of dried sulphate of zinc and glycerine answers admirably. You may apply it freely without any danger of injuring any part of the vagina protected by its epithe-

lium, and it completely destroys the morbid growth. Here is a specimen of the hard white slough it produces. I have seen the diseased part come away entire, like the shell of a walnut from the nut, leaving a healthy granulating surface below, which has cicatrized very rapidly; and I feel certain that in all cases of malignant growths about the female genital organs we shall find the sulphate of zinc a most safe and effectual mode of destroying them.

This, gentlemen, is necessarily a very imperfect sketch of a most important subject; and, in conclusion, I can only urge upon you the necessity, while you are doing all that you can to prolong the life and alleviate the distress of your patients with cancer, of never giving up the hope of discovering a cure. We have found a specific for ague; we have found a specific for itch; we can certainly cure some forms of syphilis by iodide of potassium, and others by mercury; we can prevent small-pox by vaccination. Let us hope that the day may come when we shall possess equal power over those mysterious aberrations in the processes of nutrition and decay which lead to the deposits or formations known as tubercle and cancer. But should this hope prove fallacious, or be regarded as Utopian, I must maintain that, even with our present knowledge, we have no reason to fear a comparison between what we can

do by fair and open means, and what can be really done, or has ever been done, by any cancer-curer or any secret remedy.

This, it must be observed, is what I said to my pupils in 1857. I will now say something more as to Dr. Fell, and the results of his practice as shown by time; afterwards giving a short account of the practice of the *Docteur Noir*, and of that of the Rev. Hugh Reed.

DR. FELL.

In 1857, about a month before the above lecture was delivered, Dr. Fell published his "Treatise on Cancer, and its Treatment." About three months afterwards, the surgical staff of the Middlesex Hospital published a report to the Weekly Board and Governors of the Hospital, upon the treatment of cancerous diseases in the Hospital on the plan introduced by Dr. Fell. Each of these publications requires a short notice.

Dr. Fell's book consists of sixty-three pages of text, and thirty-two pages of selected cases. Of the first sixty-three pages, only seven are occupied by an account of the author's own plan of treatment. The preceding fifty-six are filled by a very commonplace compilation from a few text-books on the varieties

of cancer and the ordinary treatment. The “author’s plan” is heralded in the following manner. It will be observed that Dr. Fell does not merely lay claim to a new and original mode of removing cancerous growths, but he claims for his vegetable remedy a power to destroy the cancerous diathesis.

“When my attention was first attracted to the study and treatment of this disease, it naturally occurred to me that before success could be obtained, it would be necessary to find some active agent exerting a specific effect upon cancerous matter, and which would exert the same influence by absorption, destroying the tendency existing in many cases in the constitution for the reproduction of cancerous cells; and which, taken at the same time internally, would destroy the cancerous diathesis. Many remedial agents were tried without producing the desired effect, and all efforts to cure the disease were for a long time unsuccessful, and apparently hopeless, until I heard of a root used by the North American Indians on the shores of Lake Superior, which the Indian traders told me was used by them with success in these affections. It is a perennial plant, known commonly among these Indians by the name of puccoon, but from the red, blood-like juice that exudes from it when cut or bruised, is called by botanists the *Sanguinaria canadensis*. It grows in great abundance in the wild forests and plains of the far West; indeed, in early spring the ground in many parts is covered by its large white blossoms. Such a plant, with showy snow-white flowers, would naturally soon attract the attention of the savage; but when he found that whenever this plant was injured or a leaf-stalk broken, it exuded a copious stream of a blood-like fluid, he immediately considered it as sacred, and a great medicine. And

no doubt some poor squaw, suffering from this dreadful disease, was the first who applied it, after having tried all the simple herbarium of the uneducated savage without success, and then, in despair, applied the bruised bloody pulp of the white-flowering puccoon. This extraordinary plant, although unknown to civilised man as a remedy for cancer, has been long well known as a powerful emmenagogue and alterative, and, as such, has been admitted into the Pharmacopœia of the United States ; and it is a question well worth consideration to ascertain how far its connexion and power over the uterine functions has to do with its influences in destroying the peculiar cancerous diathesis existing in most cases."

I need not describe Dr. Fell's plan of local treatment. It is now perfectly well known that the Sanguinaria has nothing whatever to do with the results of the application, and that the chloride of zinc—a well known caustic—is the only active agent employed by Dr. Fell. The effects of the caustic as used by him are precisely those described by Canquoin, Maisonneuve, and others who have used the chloride of zinc in paste in France ; they are precisely those observed years ago by Sir Benjamin Brodie, and more lately by other surgeons in this country ; they are also very similar to those obtained by Mr. Stanley at St. Bartholomew's by the use of dilute solutions of the chloride of zinc. The Sanguinaria does not appear to be even as useful as the ranunculus and coltsfoot, mixed with the arsenical paste used in the last century by Plunket and Guy. This had the effect of

blistering the skin, and doing away with the necessity for cauterising it with nitric acid after the fashion of Dr. Fell.

If, then, Dr. Fell's caustic be nothing new, nothing but the chloride of zinc so well known to all surgeons, we have to inquire if there be anything in the mode of application for which Dr. Fell deserves any credit. He says his plan of incising the eschars and re-applying the caustic in order to hasten its action is "*believed to be entirely original.*" It is now perfectly well known that Dr. Fell had no claim to any originality even here; he used an old and well-known caustic, and he used it in a manner familiar to many surgeons. I have already known this by the quotation in my lecture from Mr. Justamond's work,—that this surgeon hastened the action of caustic by scarifying the destroyed surface and inserting the caustic into the scarifications. It is true that Dr. Fell does something more than this: according to the report of the surgeons of the Middlesex Hospital, it is after a superficial slough has been formed that the "characteristic process in the treatment of Dr. Fell" commences:—

"Parallel scratches or shallow incisions were made along the charred skin, for the purpose of inserting into them strips of calico, smeared with the paste. These incisions varied in number, being usually made about half an inch apart, but sometimes there were not more than four in a breadth of five or six inches. They were carried along

the whole length of the eschar, and to a depth somewhat short of the living tissues beneath. For the first two or three days they were seldom deep enough to lodge the strips of calico; still even the scratches sufficed for the percolation of the remedy into the subjacent living parts. Each day the incisions were a little deepened, and fresh strips of anointed calico, or rolls of cotton wool covered with the paste, were inserted into them, until in the course of from two to seven weeks, the average time being about three weeks, the whole depth of the tumour was penetrated; and then the use of the paste was discontinued, and the eschar left to separate."—Pp. 16, 17.

This is certainly something more than Justamond did. His scarifications are carried on by Dr. Fell till they become daily incisions. This is something—not much perhaps—but is it an invention of Dr. Fell?

In reply to this question, I may quote the following passage from an article I wrote and published in the *Medical Times and Gazette* of October 17, 1857.

“In the *Archives Générales de Médecine* for January 1857, will be found an account by M. Girouard, of Chartres, of a plan of removing limbs and breasts by caustics, which he had adopted since 1841. Relating a case of partial amputation of the foot by caustic in 1841, he says, ‘I applied a layer of Vienna paste from a sixth to a fifth of an inch thick, and a third of an inch broad. Twenty minutes afterwards, the skin being completely cauterized, I divided the eschar throughout its whole extent, and I pressed into the fissure morsels of zine paste, about an eighth of an inch thick. The next day having again divided the eschar and separated the borders of the fissure, I placed at the bottom, portions

(*bandelettes*) of zinc paste about a quarter of an inch thick. Twenty-four hours afterwards, I again deepened the fissure by dividing the eschars.'—P. 83.

“Can any description be more accurate than this of the ‘characteristic process’ of Dr. Fell? The Vienna paste is substituted for nitric acid, it is true, but the daily incisions and the introduction of the zinc paste are identical. The practice has been followed by M. Girouard since 1841. Since 1849, it has been extensively followed by MM. Salmon and Manoury. A paper by these gentlemen was published in the *Union Médicale* in 1856 (pp. 441, 446, 474, and 487), upon amputation by caustics. The account of the method of operating upon two cases in 1849, is fully detailed. The skin in the direction of the flaps is destroyed by Vienna paste, and then, says M. Salmon, ‘Upon this eschar the bistoury first traced a mere scratch (*léger sillon*); then I incised the mortified skin with scissors, constantly avoiding the production of pain. The dressing was terminated by the application of a caustic paste of chloride of zinc and alum divided into strips (*lanières*), and implanted in the furrow resulting from the incision of the skin.’ Here MM. Salmon and Manoury append the following note:—‘To be just to all, it must be said that we imitated this operative proceeding after what we had seen done by M. Girouard, physician, of Chartres, in the removal of tumours of the breast. In this respect, also, we imitated M. Canquoin, whom M. Girouard had seen operate in Paris under circumstances of which the latter has informed us.’ (We may observe that Canquoin first made a secret of his caustic, but his *Memoir* was published in Paris in 1835.) M. Salmon goes on with an account of his second proceeding in the evening—‘I removed the strips of caustic placed in the morning; I lacerated the eschar produced, by scraping it with a spatula on the point of a bistoury, then I re-applied more strips of caustic as before.’”

It is quite clear, therefore, that Dr. Fell acted

for two years as a promulgator of a worthless secret remedy (for the Sanguinaria, his only secret, is utterly worthless as a cure for cancer), and that his claims to be the inventor of a new method of using a well-known caustic are utterly unfounded. He professed to be able to cure cancer by a new remedy. All he did was to remove cancerous growths by an old caustic, in a manner which had been previously practised by other surgeons.

But this question of originality, or any comment on the Sanguinaria delusion, are now of little importance compared to the question,—What have been the results of this treatment?

The Report from the Middlesex Hospital was drawn up in August. Dr. Fell had only commenced his practice there in January, yet in two of the cases he had treated, say the surgeons who drew up the Report—

“Disease appeared behind the pectoral muscle, while still under treatment. The tumour was extirpated in ten patients, but in three of them cancerous tubercles formed in the adjoining skin, and a fourth has returned to the hospital, after an absence of three months since the wound healed, with a fresh tumour in the substance of the breast. One patient was sent home for a few weeks, it being doubtful if any disease remained or not. The remainder are still under treatment.

“It is in regard to this important question—the interval that may elapse before the return of the disease—that we necessarily feel the need of further observation of the cases ;

since time only will allow of a complete comparison between the two modes of treatment. No delay, however, is required for concluding, from the numbers just given, that in this point of view the new plan of treatment is not superior to that by the knife. There has already been a return of the disease in four out of the fourteen completed cases, and a failure in extirpating it in three others out of the whole number of twenty-one. On the other hand, looking to the character of the recurrent disease, neither can we say that the newer mode is proved as yet to be inferior to the knife."

But the narration of individual cases is perhaps a better mode of arriving at the truth than a statistical inquiry, which time alone can settle satisfactorily. The surgeons of the Middlesex Hospital will probably feel it to be their duty to let the profession know what have been the results of the practice in the "remainder still under treatment," and in what proportion of the total number of cases treated the disease has returned, and within what period.

In the meantime the lesson taught by the following narrative should not be lost.

A little book was published in 1857 by Messrs. Nisbet, entitled "A Memorial of the Last Days on Earth of Emily Gosse. By her husband Philip Henry Gosse, F.R.S." From this memoir we learn that about the end of April, 1856, Mrs. Gosse "became conscious of a hard lump in the left breast." This was pronounced to be cancer, and excision recommended. The narrative proceeds as follows:—

“But my relative had heard of an American, who professed to cure cancer by a new process, without the need of an operation; and as he was said to invite the notice of the faculty, Dr. S—— kindly offered to attend on one of his public days, and let us know the result. He accordingly went, and, from his report, we determined to consult the American physician, residing at Pimlico.

“On our visit, he professed to be in possession of a secret medicament, by the external application of which to a cancer the diseased portion gradually became dead, spontaneously separated from the healthy flesh, and sloughed away, leaving a cavity, which soon healed, and the patient was well. He showed us photographs of many patients in different stages of cure, many large tumours preserved in spirit, which had been sloughed away under his treatment, and, what was still more to the point, we saw one of his patients dressed. This was a middle-aged woman, suffering under cancer of one breast, who told us she had been three weeks under Dr. F——. We saw the large tumour, dark, hard, and apparently dead, deeply scored across, and divided by a distinct line of demarcation from the white living flesh around. We saw that when the doctor applied his fingers there was a separation, all round, of the dead tumour from the healthy flesh, so that we could see down to the depth of an inch or more, in which there was no union of part with part, except that of a few mucous threads, which he divided with scissors. The woman declared that the pain of the process was not worth speaking of.

“These things we saw, but for others we were dependent on testimony only; as, for instance, the painlessness of the treatment, in which, to judge from what my beloved Emily subsequently underwent, as well as others who were treated coetaneously with her, I believe we were greatly deceived. We asked concerning the probabilities of the cure being a complete one. Dr. F—— assured us that he, and the few co-possessors of the secret in the United States, had found

that, out of every 100 cases treated, not more than twenty instances occurred of a return or reappearance of the disease ; whereas, in ordinary surgical practice, as many as 80 per cent. is about the average of recurrence.

“On the 12th of May, my dearest wife was placed under the care of Dr. F——. He conceived hopes that the tumour might be dispersed or absorbed without extraction ; and at all events recommended that this alternative should be tried for some time. He distinctly assured us, over and over, that even should this hope be disappointed, the tumour would not be in a condition appreciably less favourable for the extractive treatment, after the lapse of a few months, than at that time ; and he entertained confidence that the case was one which he should be able to bring to a happy issue.

“He commenced by applying two or three kinds of ointment to the breast, using them alternately on successive days ; and this mode of treatment was continued until the end of August. It involved the necessity of my beloved wife's going from Islington to Pimlico three times a-week—a wearisome task, but which opened up to her, what she greatly loved and valued, opportunities of serving her Lord in testimony, both by distribution of Gospel tracts, and by conversation with strangers.

“One of the unguents employed was attended with pain, presently causing a gnawing or aching in the breast, which at times was scarcely supportable. No marked change occurred in the appearance or feeling of the tumour throughout the summer. It certainly had not extended, and we fancied its volume was slightly diminished. It was not the seat of any pain, except what was produced by the application.”

Then follows an account of an autumn holiday at Tenby. Mr. Gosse says :—

“Our sojourn at Tenby continued from the 29th of August to the 2nd of October. During the first three weeks

my Emily was ill with general weakness and headache; and afterwards the use of the ointments furnished by Dr. F—— produced such intense aching and ‘drawing’ pain in the tumour, that altogether it was a time of much suffering. . . .

“We returned home on the 2nd of October, and immediately saw Dr. F——, who advised the removal of the tumour. The lack of any apparent result from the five months’ attempt to disperse it, had led us to look to such a course as the most hopeful. On the 10th, therefore, my beloved, accompanied by our little boy, her faithful companion and assiduous nurse throughout her trial, removed to a lodging in Pimlico, uncomfortable in many respects, but presenting the advantage of being next door to Dr. F——’s own residence. The next morning, October 11th, the process of extraction commenced.

“The whole surface of the left breast, an area of four inches in diameter, was wetted with nitric acid, applied by means of a small bit of sponge tied to the end of a stick. The object of this application was to remove the skin. The smart was very trying, and continued for several hours augmenting; the effect being to blister and destroy the whole skin, exactly as if a severe burn had taken place.

“On the succeeding day, the doctor proceeded to incise the tumour, in order that it might be penetrated by the peculiar medicament which he used for its separation. With the scalpel he drew, on the surface of the now exposed flesh, a series of parallel scratches, about half an inch apart, reaching from the top to the bottom. When these were made, a plaister of a purple mucilaginous substance was spread over the whole. The next day, on renewing this plaister, the scalpel was passed again along the scratches, deepening them a very little; and a fresh plaister was applied. By the daily repetition of this operation, the scratches were in a few days deepened into long parallel cuts or scores, into which narrow strips of linen rag, covered with the purple mucilage, were pressed, instead of the common

plaister. Every day these strips of rag were renewed, and the scores were made deeper and deeper.

“The effect of this application was very distressing. In about an hour after its renewal every morning, the breast began to be the seat of an aching, piercing pain, under which my beloved sufferer was fain to wander up and down her narrow room, leaning now and then her head upon the mantel-piece or against the wall, unable from the agony to lie, sit, or stand. For several hours this continued, after which the intensity of the anguish commonly abated. Abatement of suffering, however, was the most she could look for; *suffering never ceased from the beginning of the operation, till her spirit was freed from the worn-out body.*

“Her sleep was greatly disturbed by the pain. In health she had been accustomed to sleep well, and had been generally able to forget herself in a few moments after lying down, whether by day or night. But from the commencement of the extraction to her departure, it was a rare thing with her to be unconscious more than half an hour at a time, and a large portion of every night was passed in the wakefulness of pain. From the first she was unable to lie down, so that the repose she took was in a semi-recumbent position, propped up by pillows. The progress of the operation was attended by considerable aching and loss of muscular power in the left arm, which prevented her from reclining at all on that side; hence she was reduced to use the half-sitting posture, varied occasionally by a very slight leaning over to the right side.

“The only sleep she obtained, for the most part of the time she was at Pimlico, was induced by opiates. We were very reluctant to use them, but Dr. F—— urged them upon my beloved as absolutely necessary, and the experience, that sleep was out of the question naturally, induced her to yield. She took the preparation known as Battley’s Sedative, commencing with twelve drops, but at length taking twenty to twenty-five drops nightly.

“The scoring of the tumour was not attended with any pain. The purple mucilaginous substance had evidently a caustic power, killing the flesh so far as it penetrated. It had, too, an antiseptic property ; for the part so destroyed had no tendency to decomposition ; it was brought to a woody hardness, and a deep black colour, without the least odour. It was one merciful mitigation of her sufferings, that, all the time she was under Dr. F——, not the slightest offensive odour was perceptible from the disease.

“When the incisions had reached the depth of about an inch and a quarter, the operator announced that he had reached the bottom of the cancer. He now scored no more, but applied a ‘girdle,’ or annular plaister, around the line where the killed tumour adjoined the living flesh ; a line which was marked with perfect definiteness. The object was now to promote a suppuration, whereby the tumour should be gradually detached from the flesh, and sloughed off, like a stone dropped out of a basin. It was nearly four weeks after the removal of the skin that the ‘girdle’ was first put on, and two weeks more before the tumour came away. A furrow, gradually deepening, formed between the living flesh and the hard and black tumour, and this was filled with pus. The sensation now became that of a heavy weight dragging at the breast, and this feeling increased as the connexion between the parts daily diminished. At length, on Sunday, the 23rd of November, to our delight, the great insensible tumour fell out of its cavity, hanging only by a slender fleshy thread, which presently yielded, and the breast was relieved of its load—the dead body that it had so long carried about.

“There it lay on the table, a hard and solid block of black substance, resembling in size and shape a penny bun, deeply scored on one surface, and on the other nearly smooth. And then on the breast of my beloved sufferer was the corresponding cavity, raw and partly lined with pus, but presenting an apparently healthy appearance.

“ This was the point to which our hopes had been directed for six weeks past—hopes not unmingled with fears, however; for we had ascertained that, not unfrequently, after the main tumour had come away, as in this instance, a piece of the diseased flesh was left—a sort of offshoot of the tumour, in the bottom of the cavity, imbedded in the flesh. In such case, there was no alternative but to treat this piece with the purple mucilage, like the original tumour. . .

“ The cup was soon dashed from our lips; for the doctor presently announced that there was a large piece on the outer edge of the cavity, which, though he could not say it was actually cancerous, he deemed it prudent to take away. The whole painful process had now to be gone over again, with the exception of the application of nitric acid. . . .

“ Nearly four weeks more of the grinding, wearing agony were now to be borne; by which time the continued pain, the sleepless nights, and the violence done to the whole system by the destruction of so large a portion of the tissues, had accomplished a work but too perceptible. Her strength was greatly reduced; to the last she crawled in every morning from her lodgings to Dr. F——’s (now removed to Warwick Square) and back, a distance of about a quarter of a mile, but it was a slow process, not performed without assistance, and it left her much exhausted; yet she always enjoyed the fresh air, and the effort.”

After describing the patients who “crowded the waiting-room,” and speaking of some of them who “passed before her into the presence of their Lord, *going home only to die*,” the narrative proceeds:—

“ On the 17th of December, the second portion of the tumour which had been treated since the 23rd of November, a mass about as large as a hen’s egg, from the outer side of the breast, detached itself; and again hope was raised. This

hope was not, however, unmixed ; for both on the inner and on the outer side of the wound, on the surface that had hitherto appeared sound, indications had begun to manifest themselves that gave us anxiety. Pimples were forming, especially under the arm ; and though Dr. F—— had hitherto treated them lightly, we did not feel able to rely on his opinion with the same buoyant confidence as at first. As before, he waited a few days before he would give any information as to the course he would follow, now that this epoch was reached.

“At length, on Monday, the 22nd, he said, after examining the wound, ‘Mrs. Gosse, I’m very sorry for this. I shall have to take out another piece under the arm.’ Her heart sank at this announcement, but she replied, ‘And what then, Doctor?’ ‘Then I must treat this other part on the inner side of the breast.’ ‘But how do you account for this spreading of the disease beyond the part you have all along been dealing with?’ ‘*Oh, ’tis in your blood.*’

“She said no more, but calmly took her leave ; and in the afternoon, when I returned to her from my daily work, she told me of the result. Worn down as she was, she felt that she could not undergo the pain of a third, and then a fourth process, the unintermitted agony of which she had sufficiently proved ; especially as there seemed no reasonable hope that the merely local mode of treatment hitherto pursued would, if continued, overtake a disease which had already spread so far beyond the area originally attacked. *We had, moreover, been all along assured that cancer was a local, and not a constitutional disease ; and therefore the announcement that it was seated in the blood, while indeed we had good reason to believe it true, took us by surprise, as contrary to the statements we had all along relied on.* The question, too, was obvious, ‘What is the use of a merely local treatment of a disease which is seated in the blood?’”

The “personal kindness and attention” of Dr. Fell

are spoken of “most gratefully ;” but Mr. Gosse then gave up the treatment, and his wife was removed home. He adds, that about the middle of January,—

“The cancer began rapidly to assume a very virulent appearance; the cavity produced by the extraction of the tumours was somewhat diminished in area, and skinned over, except in the centre, where there was a mass of raw fungoid flesh, on which a fetid pus copiously formed. The pimples around increased in number, and some of them were attended with smarting, stinging pain. A large area on all sides of the wound became swollen, livid, and quite hard to the touch. There was no shooting or lancinating pain in any part, but a burning heat in the rough pimply surface beneath the armpit, with aching in the shoulder and arm, reaching down to the hand. This arm, the left, was now become useless. These local sufferings were accompanied by shifting rheumatoid pains in the body, alternations of burning feverishness and sudden chills, paroxysms of coughing, and great debility.”

And so on, with slight variations, till her death on the 7th of February.

I feel certain that any surgeon who reads this harrowing narrative of useless torture, and compares the history of this painful case with others in which he has removed large cancerous growths in a few seconds, without pain to the patient under the anæsthetic influence of chloroform, and has seen the clean cut wound he has made unite in a few days, will be shocked by the contrast.

Another case is communicated by Dr. Tanner to the *Medical Times and Gazette* of October 22, 1859 :—

“ On January 6, 1857, Dr. Tanner was consulted by Mrs. B., aged 38, on account of a tumour in each mammary gland. The patient was married, and had been pregnant three times. On the first occasion she aborted; on the second craniotomy was had recourse to at the full term; and on the third premature labour was induced at the seventh month, but the child only lived a few days. The last labour was five years ago. On examination Dr. Tanner found a tumour in the right mamma, the size of a hen's egg; it was freely movable, rather hard, but not at all painful, and was accidentally discovered four months ago, since which time it has not increased in size. In the left gland there was also a small tumour, the size of a filbert, which was painful; it had existed four years. Dr. Tanner's diagnosis was chronic mammary tumours; he advised that they should be left alone, and stated that they were not cancerous. Ordered alteratives and cod-liver oil. On March 10, 1857, the patient again saw Dr. Tanner, who found that the tumours were in the same state as in January; though the patient said the one in the right breast was much larger. As Mrs. B. was anxious to get rid of them, she was told that they might with safety be removed by the knife if they were painful or troublesome. Without seeing Dr. Tanner again, the patient put herself under the care of Dr. Fell, who stated that the tumour in the right breast was a cancer. On May 16, 1857, this gentleman commenced its removal by applying caustic. In six weeks the mass came away; but three or four more weeks elapsed before the part healed. ‘During the process of burning it was very great agony,’ according to the statement of Mrs. B. About the middle of August the patient had severe pains in her right side, which soon affected the shoulder, arm, and hand. Dr. Fell prescribed an ointment for neuralgia, and warm sea-water baths. About the end of September ‘she could not keep anything solid on her stomach, and could take nothing but arrowroot, brandy-and-water,

and such like.' Her sufferings continued to increase, and were 'at times dreadful, the neuralgic pains extending from her neck to her knees, and sometimes would attack the head. They continued till within a few days of her death, which took place January 15, 1858.'"

In the same number of the same journal Mr. Owen, of Clapham, gives the result of a case reported at page 67 of Dr. Fell's treatise. The following is a brief abstract of the case:—

"The age of patient was 60. Three years previous to the first report (November 1, 1855), a small lump was noticed in the breast, and pronounced as cancerous; this increased to April, 1855, when it ulcerated, exuding a thin ichorous discharge. She applied to the Cancer Hospital, but without benefit, as it continued to increase. When seen by Dr. Fell on above date, the tumour was the size of a large goose-egg, with ulcerated surface of the size of a penny-piece, discharging a thin, bloody, very offensive matter; there was also slight enlargement of axillary glands. The first application was made the same day, and continued until December 12, when the tumour was destroyed.

"December 23.—The tumour came out to-day; it was six inches long, four and a quarter broad, and three and a half thick. The wound looked very healthy.'

"The subsequent reports denote a favourable progress, and the last report, on April 7, 1857, is as follows:—'Saw Mrs. M. to-day; breast quite well; she is in excellent spirits. She says she never felt better, and her friends say she looks ten years younger than she did.'

"The subsequent history of the case appears to be this:—About April, 1858, a small ulcerated opening began to appear in the line of the cicatrix, attended with much pain and unpleasant discharge. When shown soon after to Dr. Fell, he honestly at once stated his inability to be of further service as regards a cure, and throughout acted with much

kindness. After this, to the date of my seeing the case, the disease continued to extend, attended with much pain and fetid discharge, and after a time, with considerable œdematous swelling of the corresponding fore-arm and hand. Various palliatives had been had recourse to, with increasing doses of laudanum as required.

“The patient when seen by me still bore the appearance of having been a hale and hearty woman, and, although much confined to bed, was cheerful, and, notwithstanding the pain she had gone through, pretty stout. Her pulse was only a little quicker than natural; her secretions healthy; but appetite, probably from anodynes and effluvia, deficient. The arm from elbow downwards was enormously distended and œdematous. On raising the breast, a fearful surface of ulceration appeared, separating the whole breast, except at its upper and inner part, from the pectoral muscle, the whole surface having a greyish colour, and discharging a copious, offensive, ichorous fluid. The ulceration had been extending the last few days towards the axilla, and also along the lower margin of the breast, which was obliged to be supported. There had not been any hæmorrhage from this extensive surface. No enlargement of any other part of the body could be felt externally.

“I need not take up further space with any detailed account of the progress, as the treatment could be only palliative. The surface of the sore, as far as could be reached, was kept cleanly and free from smell by warm ablutions and the use of a very weak chlorate of soda solution. The general strength was supported by various tonics, and opiates were taken as required—I think more freely than I knew of; and attempts were made, by position, various local applications, and finally by frequent acupuncture, to relieve the œdematous condition of the arm, this being more a source of pain and suffering to the patient than the original disease. None, however, of these measures were of much, if any, benefit.

“ In the beginning of June some amount of hæmorrhage took place, which was restrained by styptics. The powers, however, after this, more rapidly sank, and on June 19 a very copious loss took place from some vessel towards the axilla, which continued in spite of applications, and, after five or six hours, terminated in a fatal syncope.”

Mr. Oswald Foster, of Hitchin, communicates to the *Medical Times and Gazette* of November 12, 1859, the following case —

“ Miss M. W., from Ireland, aged 56, discovered, in October, 1854, that she had a tumour in the left breast, for which she consulted the best surgical authorities in Dublin, who pronounced it to be malignant. She came to London on a visit, in 1856, when she consulted Sir Benjamin Brodie, who confirmed the opinion already given, and discouraged any active measures being taken ; at this time the skin had commenced to ulcerate, and she had enlarged glands in the axilla. ‘ The great success ’ attending Dr. Fell’s treatment of such cases did not fail to have its due influence upon the sufferer, and he was consulted by her in March or April, 1857, when every prospect of success was held out to her and her friends if she would only come and be under his treatment. She complied, and remained under Dr. Fell’s care through April, May, and June, 1857 ; and both the poor patient and her friends have often alluded to the ‘ torture ’ which she endured until the ‘ cancer dropped out,’ after which the wound healed, or nearly so, the case was pronounced cured, and a report of the same no doubt placed an additional laurel in the temporary wreath of Dr. Fell’s reputation. But this laurel soon withered, for in October of the same year, only four months after *the cure*, the part began to swell, the pain to increase, and by the end of the year glands above the clavicle had become enlarged, while those in the axilla had increased in size. In March, 1858,

Dr. Fell renewed his treatment again, holding out a prospect of ultimate success, stating that they were enlarged tubercles, which he hoped soon to get rid of. She continued more or less under his care and treatment until early in the year 1859, by which time the disease had made such progress, that Dr. Fell seeing her constitution giving way from the misery, the great discharge, and repeated hæmorrhage, was compelled to acknowledge that he could do nothing more for her.

“As soon as the weather permitted, and family arrangements could be made to receive her, she came to the house of a near relative in this neighbourhood, that she might spend the remainder of the days that she had to live in quiet, when my attention was called to her, and I do not know that I ever saw a more appalling wound or suffering case than hers, for the last two or three months of her existence. She died August 2, 1859.”

In the same journal for November 19, 1859, Dr. Synnot says:—

“One instance of a ‘cure’ of cancer by the Fell system has come under my notice, of which I send you a brief account. When Dr. Fell first made his appearance in this neighbourhood, I went, with several other Medical men, to his house. He received us most politely, and in speaking of his peculiar mode of treatment he boasted of its great advantage over the knife; in the first place, in its comparative freedom from pain; and in the second place, that the disease did not return after being removed by his process; as his remedy not only destroyed the local disease, but also exerted a specific effect upon the constitution. He also declared that his remedy contained no mineral caustic, but that all its virtue and efficacy depended upon a peculiar vegetable ingredient in his paste: but to return to the object of this note—

“On July 4, 1857, I saw Miss J. Y., 46 years of age, of a thin and spare habit, dark and unhealthy complexion. In the preceding November or December she was operated upon by Dr. Fell, and after several weeks of his peculiar treatment the tumour came away. The wound was a very long time in healing. When I saw her, where the left breast had been there was a very large puckered cicatrix tightly drawn over the ribs, and, in places, of a stony hardness; some of the glands in the axilla were enlarged and hard, and scattered through the sound skin; around the cicatrix were several nodules of cancer. This lady having recovered from the attack for which I attended her, passed from under my observation, but I have heard that she died not very long afterwards of cancer.”

My own observation of the results of Dr. Fell's treatment accords very nearly with the description of the above cases. One of the first cases he treated was related to me by the husband of the patient, himself a medical man, and it happened to be one in which Dr. Fell really did some good, and which led to his introduction to many of his earlier patients.

A lady who suffered from an ulcerated cancer of the breast had consulted several eminent hospital surgeons, and had been told that her case was not one in which removal of the breast could be recommended. Simple palliative treatment alone was adopted, and she was left in a very hopeless condition. The odour of her room, and indeed of the whole house, was so overpowering that the comfort of the inmates was destroyed; servants could not be

kept ; and even nurses could only be induced to stay by high wages and an almost unlimited allowance of brandy. Under these circumstances, Dr. Fell was applied to, and he said very fairly, that in such a case he could not do more than remove the diseased mass, and thus give temporary relief. This he did most completely : after the very first application of the chloride of zinc, all offensive odour was completely destroyed ; and even if he had done nothing more, this was felt to be a very great benefit. When this was explained to the surgeons who had seen the lady previously, they said everybody knew the deodorising power of the chlorides, of charcoal, and of other applications. Then said the husband, very justly, “ If so, why not recommend them ? It was either great cruelty or great neglect on your part.” And so unquestionably it was, and it was an illustration of the truth of the remarks I have before made in my lecture, as to the necessity of medical men attending more than they do to the means of *relieving*, even if they cannot *cure*, incurable diseases. It is by carelessness or neglect of the profession, in this respect, that empirics obtain their only real advantage. I need say little more of this case, than that the morbid growth was removed by caustics, and that the lady lived some months afterwards in comparative comfort ; but that she then died from extension of cancer over the greater part of her body.

Another of Dr. Fell's earlier patients had been a patient of mine before I left England to serve in the Eastern hospitals during the Russian war. While I was in Turkey, this lady, the widow of a distinguished admiral, "found a lump in her breast." She was told it was cancer, and soon afterwards went to Edinburgh, where a person named Beveredge said he "could rub it away." He rubbed for some weeks, but the tumour got larger. Then she returned to London, and after various opinions had been taken, an arrangement was made with Dr. Fell to remove the tumour. He was very confident in his assurances that he should effect a *cure*, and that the disease would not return. He was to be paid one hundred guineas—thirty-five when the first application was made, thirty-five when the tumour came away, and the third instalment when the ulcerated surface healed. I did not see the lady until after the second instalment had been paid, when both she and Dr. Fell were quite hopeless that his claim to the third would be established. She told me that the process of removing the breast had taken five weeks; that during the whole of that time she had been "in misery;" that for several hours after the daily dressings, the "torture had been almost insufferable;" that she had suffered very much from want of sleep and weakness, and that after the breast had come away, there was no prospect of the

remaining raw surface healing ; on the contrary, profuse discharge continued from it ; the glands in the arm-pit swelled, and the whole arm became very much swollen. Dr. Fell had ceased his attendance, and she was inhaling oxygen three times a day under Dr. Birch, hoping that the effect of this gas on her blood might lead to healing of the open surface on her breast, and that then she would be "cured." This hope proved fallacious : she went on breathing oxygen to the last, but died, as I believe, very much sooner, and after very much greater suffering, than if the disease had been left from the first to pursue its course without interference of any kind.

In a third case, I saw a lady from the country with Mr. Brown, of Stourport, in 1857. Her breast had been removed two years before. The wound had healed, but after about eighteen months had opened again. A fungoid mass sprung from the cicatrix, and there was evidence of the disease having affected the ribs. She went to Dr. Fell, who said at once, that although he could remove the growth, the ultimate result would probably be unsatisfactory. He asked a fee of seventy guineas for removing the growth. This the husband objected to, and the lady was about to return home, when my opinion was asked. I advised congelation of the growth, by Mr. Brown, her own surgeon, and she returned home next day. The result of this treatment was, that the

growth was destroyed, after being only three times congealed, and that without pain. The sore healed; and though it opened on more than one occasion afterwards, all spreading was checked and all offensive odour prevented by the use of a weak solution of chloride of zinc with opium. I saw the lady some months afterwards, looking strong and well, and I have just heard from Mr. Brown, that she lived till last October, and died at last from simple weakness. He adds, "I have reason to think that she would have succumbed much earlier had not your plan of treatment been adopted." To say the least, the patient was saved the payment of a large fee, the expense of residence in a London lodging, and was left to spend her last days in her own home and among her own friends.

Notes are now before me respecting other patients. One said, "Nothing on earth would ever induce me to go through it again." Another, during the process of removal, said, "If she had known the pain would have been so great, she would not have had it done." A third spoke of her sufferings as "the greatest of agony." A fourth, of "dreadful pain, night and day, beyond description." A fifth said she was "light-headed several nights, and could ascribe it to nothing but the intensity of the pain." The daughter of a patient who died in the Middlesex Hospital on the 10th July, 1857, after this treatment

of a malignant growth on the eyelid and cheek, said, her father “suffered wonderfully,” and wished he had never had “those horrid plaisters.”

Surely all this is more than enough to show that, while Dr. Fell failed in his first claim to be the possessor of a secret remedy for cancer, any claim of his to the power of removing cancerous growths with very little pain, and preventing their return in eight cases out of ten, is equally unfounded.

VRIÈS, THE “DOCTEUR NOIR.”

It is a singular fact that we are never without some fashionable “cancer curer.” One arises, flourishes for a year or two, and then, as all trust in his promises fades and cases of failure become known, he sinks into oblivion, and another, greater than he, arises. So last year a certain Creole or Mulatto, named Vriès, who had previously made an unsuccessful attempt to cure cancer in London, suddenly appeared as a brilliant star in the firmament of Paris. He is described as about 48 years of age, by complexion mulatto, short, and broad shouldered, with a tendency to *embonpoint*, shrewd, and well versed in the ways of the world, and with an unlimited power of inspiring confidence in those who consult him. An esteemed correspondent of mine says, “He cheers his victim on to the last, enabling him, as it were, to die easy. If hope begin to lag, he pretends that the

long-desired crisis, which must precede the amelioration, has at length arrived, and the poor sufferer again takes courage, and actually hopes on to the last moment, dying with the Black Doctor's '*moi guérir*' ('me cure') ringing in his ears."

It appears that this penultimate cancer curer made a lucky hit and cured M. Sax, the inventor of the famous horn, of a tumour on the upper lip, which had been pronounced by competent authority to be cancerous. A certain Dr. Déclat seems to have acted as a sort of medical accomplice with Vriès, to have communicated this case to the French medical journals, and this led to a series of trials in the Charité hospital under the supervision of M. Velpeau. The Paris correspondent of the *Medical Times and Gazette*, in a letter published in that journal on the 26th February, 1859, thus describes his proceedings at the hospital:—

"M. Vriès," writes this gentleman, "is now regularly installed in this hospital in the capacity of '*specialiste*,' and has been at work for the last eight or ten days. He has, at this moment, under treatment some dozen cases of canceroid disease in different forms and stages of advancement, from the simple scirrhus tumour up to the open cancerous sore. He seems to shrink from no responsibility, accepting all cases, even the most desperate, with an amount of assurance, as to their favourable result, which is perfectly amusing. We accompanied him yesterday on his visit, and during his examination of his patients enjoyed a fair opportunity of observing his manner and mode of treatment.

There are two questions which he addresses to all the patients separately. The first refers to the state of the bowels, the second to that of the tongue. Should the former be not quite satisfactory, he invariably orders a dose of castor oil, which must be followed in the space of five minutes by a cup of broth, in order to secure its efficient action. This point disposed of, he draws from his pocket a circular-shaped thermometer, which he winds up with a key precisely as one winds up a watch; he then applies it to the vicinity of the diseased part, for the purpose, we presume, of ascertaining the temperature. Here ends the diagnosis. Naturally, the treatment being a profound secret from all the world, it is not to be expected that I can enlighten you in reference to its nature; its effects on the different cases I shall, however, carefully observe, and take an opportunity of communicating when the proper time shall arrive. Dr. Vriès, unlike the other surgeons of the hospital, has no need of a train of followers, as he combines in himself the several offices of surgeon, clerk, and apothecary. He takes no note of the case, nor does he require to prescribe—his physic is in his pocket. Not even a nurse is required to administer the drug. Fearful lest it should fall into the hands of some prying chemist, the pills and powders only quit his hand to be placed in the patient's mouth—in other words, he never loses sight of his medicine until he is perfectly convinced that it has disappeared in the patient's stomach."

On the 12th of March a second letter from the same correspondent appeared, giving a graphic description of the sort of treatment medical men may expect who give even the smallest indirect encouragement to such persons by even watching their proceedings.

“ Scarcely had the noise of the *pretended* cure of M. Sax (for cure M. Velpeau does not yet consider it) ceased to ring in the ears, when forth comes another statement (by whom made or in what quarter it originated it is not difficult to divine) to the effect that the ‘ Administration des Hôpitaux ’ (and not M. Velpeau on his individual responsibility) had actually invited M. Vriès to undertake, in the wards of ‘ La Charité,’ the treatment of certain diseases deemed incurable by the ordinary surgeons of that institution. Not content with this glaring perversion of the truth, M. Vriès, or some one interested in him, has caused to be inserted in some of the public journals certain paragraphs, wherein we are informed that his success in the Hospital is beyond a doubt, sundry of the cases under his care showing not only marked symptoms of amendment, but inspiring the most sanguine hopes of complete recovery. M. Velpeau, who has all along been carefully watching the progress of these cases, and who has not been able up to the present moment to discover the slightest improvement in any one of them, was naturally much irritated by these falsehoods, and on last Thursday morning he attacked M. Vriès in no measured terms, while the latter was engaged at the bedside of one of his patients, and a scene ensued such as I never before witnessed in the wards of an hospital. Really it was painful and undignified, and yet, at times, it bordered on the ridiculous. Velpeau accused Vriès of wilfully perverting the truth, both in verbal declarations and in newspaper paragraphs; of bribing the patients to conceal their real feelings in replying to the questions of medical men who visited them, and of having recourse to many other base subterfuges, with a view to the concealment of the truth, and the establishment of his own popularity. ‘ You were invited here, Sir,’ said M. Velpeau, ‘ in order that your system might be fairly tested; and on your accepting the invitation it was expected that you would act with a certain amount of honesty and good faith. This you have not done, and it remains for me now to assure you

that I will not be your dupe. You, with great assurance, told me that you would cure all the cases which were then put under your care; but you have not succeeded in producing the slightest amelioration in any one of them; and what is more, I feel justified, from what I have observed, in adding that you will not cure one of them.' M. Vriès retorted by denying the charges made by M. Velpeau, and declared that the latter, through his 'internes' and nurses, had thrown every possible obstacle in his way; and that, should the same unjust treatment be persevered in, he would leave the hospital, and transfer all the cancer patients to a 'Maison de Santé,' where he would maintain, treat, and cure them entirely at his own expense."

This history is continued in another letter, published on the 9th of April, giving an account of M. Velpeau's report to the Academy of Medicine on the result of Vriès' treatment.

"The reasons he assigned in justification of his having admitted Vriès into his wards were as follow:—'First, not believing a thing does not imply that it is absolutely false; besides, I should be so very happy were such a discovery as the quinine of cancer to be made, that, to those who speak of such a thing to me, I am always disposed to say "*voyons*." 2nd. Not being able to affirm or deny that which I do not know, I require to see and judge for myself in a place where no deception can be practised, in order that I may be in a condition to reply on full conviction to the questions which are constantly being put to me. The trial has been made, and for the following reasons I characterise M. Vriès' pretended power to cure cancer as nothing short of a gross delusion. 1st. Because M. Vriès has not cured any of the cancerous patients who have been confided to him, whether in London, in the Hôpital St. Louis, at La Charité, or in his

private practice, and that his treatment has not, in the least degree, retarded the usual progress of the disease in any one case. 2ndly. Because the composition of a remedy, which should always be the same if regarded in the light of a specific, has frequently varied in the hands of its pretended discoverer. In India, the remedy he employed was applied to the sores in the form of cataplasm; in England it consisted, as proved by Mr. Weedon Cooke, of aloes and iodine; in Paris it is an inert vegetable powder mixed with nitre or alum, in the form of pills, together with powders of arrowroot, sugar, and camphor. 3rdly. Because M. Vriès has no idea of the nature of cancer, nor of the manner in which a patient should be examined. 4thly. It does not seem that he has had any medical education, and so self-evident is this, that to him the patients are going on well if they themselves only say so, and if any medical man present doubts the condition, he appeals to the bystanders, albeit non-professional, to decide the point, and he has been heard to say with the greatest assurance at the bedside of a moribund in the last stage of cancer, "This patient is going on well; six months hence, gentlemen, you will all adopt my method." 5thly. Because if a remark be made to him that certain patients whom he promised to cure are dead, he replies, "Why, I am not God Almighty; I cannot prevent death." 6thly. There is nothing but contradiction in all he advances: for example, at one time he states that an amelioration in all cases under treatment is preceded by a crisis, while he at another time declares, in the columns of non-medical journals, that all the patients in La Charité are improving, and that certain of them are in the way of cure, and yet no crisis has been observed in any one of them.' After adding several other reasons of a minor description, M. Velpeau ends by a declaration to the effect 'that Vriès has not found the specific for the cure of cancer; that he has never cured a true case of cancer, and what is more, that he never will cure one with the treatment which he employs.' "

The next we hear of Vriès is an order for a peremptory sale at the French "Tattersall's" of his carriage and horses seized by his landlord for rent, and an account of his appearance before the Tribunal of Correctional Police to answer the charges of illegally practising medicine and pharmacy, and of swindling. The report in *Galignani's Messenger* says—

"The accused stated his age to be 55, his profession that of a physician, and his birthplace Surinam. In reply to questions of the President, he stated that it was in 1834 that he had left his country, and that he had visited Holland, America, and England, to introduce foreign medicines. It was true that in England he had endeavoured to set up a new religion, had preached against the idolatry of Rome, and had proclaimed that he feared neither the poignards of the Jesuits nor the thunders of the Vatican; but that affair was now ended, and he occupied himself no more with it. At London, his system of medicine had not succeeded, because there, as at Paris, he had been unfairly treated. He lost an 'enormous sum' at London. 'You came to Paris in 1853,' said the President. 'What did you come for?' 'To introduce foreign medicine, and to propose means of replacing steam in locomotives.' 'You are, then, a universal genius?' 'Every physician is a chemist.' 'You took the name of the Black Doctor, though you are not what may be called black; and you wrote to the President of the Academy of Medicine, a letter, in which you undertook to cure persons afflicted with cancer, dysentery, and dropsy. Pray, who made you a physician?' 'I, myself, sir,' answered the accused. 'But you represented that you were a physician of the University of Leyden?' 'Hippocrates had no diploma; and if the Lord himself were to return to earth to cure men, the Faculty of Medicine would prosecute him!'

‘When you had gained a certain degree of notoriety, did you not obtain permission to exercise your system of curing cancer in the Hôpital St. Louis?’ ‘Yes; but when Dr. Bazin, of that hospital, saw that I was likely to succeed, he would not let me continue.’ ‘We now arrive at an eventful period of your career. In 1858 you pretended that you cured M. Sax of cancer?’ ‘I believe that I did cure him.’ ‘In consequence of the notoriety which you gained, medical men deemed it right to ascertain whether or not you really had the means of curing cancer, and Dr. Velpeau introduced you to the Hôpital de la Charité?’ ‘Yes; and if I had been allowed to continue my system, I should have effected cures.’ ‘Seventeen persons afflicted with cancer were there placed in your hands, and you undertook to cure them in six months: but at the end of two months seven were dead?’ ‘Not one!’ ‘Dr. Velpeau and Dr. Fauvel affirm the contrary. The former analysed your remedies, and found in them nothing peculiar,—nothing that is not to be obtained everywhere. But as to your patients in the hospital, they are at this moment all dead, except two, and those two are dying!’ ‘At the end of two months none were dead, and since then it is not I who have attended them!’ ‘On the demand of Dr. Velpeau you were excluded from the hospital, and then you caused puffs on your skill to be inserted in the newspapers, and had your portrait published. You always told the people who consulted you that you were certain to effect a cure?’ ‘*The promise of a cure gives moral force to the patient.*’ ‘You always stipulated on being paid before you commenced operations, and you did not always adhere to the bargains you made. Thus, a Spanish lady came from her own country to consult you, and you undertook to cure her for 10,000f., of which 3,000f. were paid in advance. But after you had got this latter sum you learnt that the lady was rich, and you wrote to insist on having 40,000f. with 10,000f. down. She complied with your request, but she died!’ ‘I demanded payment

from my patients according to their means.' [The President here mentioned several cases where the patients died after the pretended cures of Dr. Vriès.] Witnesses were then called. Several deposed that Vriès had professed to be able to cure members of their families affected with cancer, but that he had failed, in some cases the patients dying. M. Redot said that after the accused had treated his wife for some time, he (Redot) had asked him whether he thought he could effect a cure. 'Certainly!' said Vriès, and yet at that very moment the poor lady was dead! His (M. Redot's) servant was so exasperated at the man's presumption that she had called him an ass and a thief. In his case, however, defendant had restored the money which had been paid. M. Sax was then called, and his presence excited much interest. He said that he had been afflicted with such a terrible cancer in the lip, that Dr. Ricord had not only told him that an operation was necessary, but that it would most likely end fatally, and had accordingly advised him to put his worldly affairs in order. Nevertheless, in eight days Vriès had perfectly cured him, and what was more, had taken 2,000f. instead of 3,000f., which had been promised. Several other witnesses were then called, and among them was Dr. Fauvel, who described what took place in the Hôpital de la Charité, and who declared that the defendant did not even know what a cancer was; also, the director of the School of Pharmacy and some apothecaries, who deposed that the substances which the accused had pretended were remedies from unknown plants, and to which he had given fantastic names, were simply alum, sulphate of potass, opium, &c. The evidence for the prosecution having been closed, numerous witnesses were called on behalf of the accused, and they declared that he had cured them of complaints more or less grave; one of them, a workwoman, who had been in the Hôpital de la Charité, even said that he had cured her of cancer. At this stage of the proceedings, the further hearing of the case was adjourned for a week."

The case was finally decided on the 11th instant, and the following judgment was pronounced :—

“ As regards the accusation of swindling,—

“ Considering that it results from the investigation and pleading that Vriès, by assuming the false quality of doctor of the faculty of Leyden, while he is devoid of even the most elementary notions of medical science, came to France after vain attempts to impose upon public credulity in England ; that, after having profusely distributed prospectuses which announced that he had received supernatural revelations, and, having thus acquired a notoriety favourable to the realization of his plans, he has, under the name of the ‘ Black Doctor,’ announced by a great number of publications that he had discovered in the tropical regions an infallible antidote which he called ‘ the quinquina of cancer,’ and also other specifics against asthma, dysentery, and against the most serious maladies that afflict the human species ; that, having succeeded by these means in procuring patients, he treated them, by contract, for considerable sums of money, of which he required a portion before the treatment, either with the patients themselves or with their relations, holding out to them the chimerical hope of a complete cure, of which he energetically affirmed the certainty ;

“ Considering that it results from the evidence of medical men who were questioned that Vriès is in profound ignorance of the healing art ; from that of chemists that the medicines he ordered them to prepare in great quantity were nearly all of a powerless and insignificant nature, and that thus he audaciously deceived the public by announcing and causing himself to be announced by his confidants as a regenerator of the medical science, and a benefactor of mankind ;

“ Considering that there is no swindling more dangerous nor more deserving of the severity of justice than that which, speculating on human life, addresses itself either to

the fears which the sufferings of death cause to the sick, or to the feelings of affection which animate their families, to obtain considerable pecuniary sacrifices by holding out to them the chimerical hope that the sums paid in advance would be restored to them in case of failure,—a restitution which was never made in any particular case, except one, when Vriès affirmed the cure of one of his patients who was dead ;

“ Considering that by these means Vriès has in less than three years caused to be given to him sums of money of greater or lesser amount by various persons, and notably by Carriguiry, 10,000f. ; by Capelman, 7,666f. ; by Mignot, 3,000f. ; by Rougemont, 6,666f. ; by Chardin, 1,600f., &c. ;

“ Considering, especially, that by falsely persuading the widow Riffef that he was instructed by M. and Madame Buck to ask them to advance him on her account the sum of 1,000f., the price for the complete cure of their daughter, while she was not cured, and while her parents refused consequently to pay to Vriès an amount for which they did not hold themselves debtors, he procured from the said widow Riffef the above-mentioned sum, and thus swindled a portion of the fortune of another :

“ As regards the prevention and illegal practice of medicine and pharmacy and the sale of secret remedies,—

“ Considering that it is established that since less than three years Vriès has illegally practised medicine, with the circumstance that he assumed the title of doctor, to which he had no right ; that he likewise offended against the laws on pharmacy, by selling and distributing medicines without being provided with a chemist’s diploma ; that at the same time he has prepared and distributed substances not inscribed in the codex, and having the character of secret remedies ;

“ Considering, consequently, that Vriès has rendered himself guilty of the offences provided for by articles 35 and 36 of the law of the 19 Ventose, year XI., 6 of the ordon-

nance of the 25th of April, 1777, 36 of the law of the 21 Germinal, year XI., and 403 of the Penal Code ;

“ For these reasons it sentences Vriès to 15 months’ imprisonment and 500f. fine.”

And here we may leave M. Vriès.

THE REV. HUGH REED.

It may be looked upon as a harsh measure to associate a clergyman of the Church of England with such names as Pattison, Fell, and Vriès ; but it must be remembered that Mr. Reed has identified himself with this class of practitioners by the use of a secret remedy for his own profit.

Mr. Weedon Cooke, in a very able letter in the *Times*, says of one poor woman who travelled from the country to place herself under his treatment, that “ she was in poor circumstances, but, having all confidence in the recommendation she had received, she was willing for so great a boon as was held out to her to spend some of her savings. She accordingly paid her railway fares and the usual honorarium (17. 1s.) to her new clerical doctor. Subsequently, however, upon her representation that her purse would not bear these depletions, the rev. doctor was kind enough to reduce them to a smaller amount.”

If Mr. Reed is content with small sums from those in “ poor circumstances,” he certainly is apt to

run into the opposite extreme with those who can afford to pay. Two instances of this attempt to procure large sums of money have been brought under my notice:—

In one case a gentleman, who has a cancrroid ulcer on the face, was told lately by an eminent surgeon that the ulcer was quite curable; but that it would be necessary to use a powerful caustic, and that even if this were used under chloroform, some severe pain might come on for the next day or two. To this pain the patient objected, and, hearing of Mr. Reed, sent for him. The reverend cancer curer came, said he could cure the ulcer, and offered to do so for *a hundred guineas*, to be paid in weekly instalments of twenty-five guineas from the commencement of the treatment, the last instalment only to be left till the completion of the cure. This was quite enough for the patient, who gave Mr. Reed, as I am informed, a five-pound note for his trouble in calling, and intimated that he did not wish to see him again.

In a second case, I am informed by Mr. J. Z. Laurence, of Devonshire-street, that Mr. Reed asked a hundred pounds, and promised to cure a patient who is actually at the point of death from a cancer of the face. Here, also, the money was to be paid in instalments, £33 in advance, £33 when the patient felt better, and £33 when he was cured. The patient's friends demurring to these terms, Mr. Reed

undertook the cure at a guinea a visit, but his services were declined.

It is quite clear, therefore, that notwithstanding the halo of respectability thrown over Mr. Reed by his association with the Church of England as a minister, we are fairly entitled to class him with those men who make use of secret remedies for their own emolument—remedies which they keep secret, callous to the feelings of thousands who are languishing under terrible diseases, instead of publishing them for the benefit of mankind. It has been well said of Mr. Reed by a writer in the *Lancet*, “Modesty does not restrain him, for he pretends to cure cholera, ovarian dropsy, phthisis, and cancer. Humanity does not urge him, for he keeps his remedies secret. Christian benevolence does not move him, for he cures for money.” It would, perhaps, have been more correct to say, “he takes money for promising to cure incurable cases.”

It seems that cancer curing is not Mr. Reed's first experiment in the art of healing. There is a pamphlet published in 1858, entitled “Observations, with Proofs that Cholera and Small-Pox are both to be Prevented and Cured: An Offering to the Public, by the Rev. H. Reed, late Incumbent of Lima, Savannah, Clarendon, Jamaica, and now Officiating Minister of St. Martin-in-the-Fields, London.” In this pamphlet he tells us that small-pox is not to

be prevented “through the mysterious absurdity of vaccination,” while cholera “may be met and overcome with certainty and ease ; nay, it cannot attack any subject to the proper preventive remedy.” He does not divulge the important secret by which the whole human race might be freed from the attacks of two of its most deadly enemies ; or afford any proof of his ability to clear away either cholera or small-pox. We are accordingly left to deal with his claims to the character of a cancer curer.

The case which seems to have first brought him into public notice has been extremely well described by Dr. Whitby, of Ottery St. Mary, Devon, in a letter dated January 2, 1860, published in the *Medical Times and Gazette* of January 7. The patient was the Rev. H. T. Head, Rector of Feniton. This gentleman, who is about sixty years of age, consulted Dr. Whitby, in May, 1858, for the second time, on account of obstinate ulceration about the palate and roof of the tongue. The first attack had occurred about a year before. Dr. Whitby and Mr. Kempe, of Exeter, agreeing that the disease was malignant, Mr. Head came to London, and was treated by Dr. Fell ; who applied a solution of tannin to the sore, and gave pills of arsenic and sanguinaria internally. Mr. Head returned in about a fortnight, expressing himself as quite well, did his duty, took a great deal of exercise, but, says Dr. Whitby :—

“The tumour itself, however, remained in *statu quo* until about seven weeks ago, when he tells me he was seized with great pain in the throat, and during the night something seemed to burst in the region of the tumour; there was a great discharge of very offensive matter, and he felt very ill. He immediately determined to go again to London, with the intention, I believe, of consulting Dr. Fell; but, hearing on the journey of Mr. Reed’s treatment, when he arrived in London, Dr. Cronin was sent for, and by his advice Mr. Head went to Mr. Reed. Mr. Head’s state, after being a week in town, as described to me by a barrister, a mutual friend, was a most fearful one: he was almost entirely unable to swallow, very desponding as to his ultimate recovery, though otherwise calm and cheerful, and having a cavity in the throat as large as an orange, from which there was a constant fetid discharge: all around him thought he had not a week to live. The treatment he underwent consisted principally of the application of a gas to the outer part of the jaw, corresponding to the cavity within. This gas was generated in the retort placed on the table, and conveyed through a tube to the jaw. In a fortnight from the commencement of this plan he began to improve, the discharge lessened, became less offensive; he gained strength and spirits, and was able to return here on Saturday week last, doing his duty in church on the following Sunday.

“The day before yesterday I saw him, examined his throat, and also the materials for making the gas: his general appearance was much improved, and he declared himself feeling quite well. On looking into the throat, all trace of the morbid growth had gone, and in its place was the partially cicatrised and granulating remains of a large cavity, extending from the former seat of the tumour, a good deal further forwards in the roof of the mouth; it had closed entirely at one end, and was looking remarkably healthy, excepting at one small spot, where a portion of ash-coloured slough was still adherent. On going to see the gas apparatus,

the smell of chlorine was at once evident, and I found that the materials for generating it were chloride of lime and sulphuric acid ; these were put into a retort, and heated by a spirit-lamp, the gas passing off above through a tube having a wine-glass-shaped funnel at its extremity. This funnel-shaped end was placed at the angle of the jaw, and the gas allowed to permeate the skin for several minutes three or four times a day ; but in addition to this, while in London, a whitish powder was frequently blown in upon the sore through a tube, the effect of which was to produce salivation. In spite of this, it is still used occasionally. The patient was ordered to live well, and is taking carbonate of iron three times a day."

Now, any surgeon who reads this account of the case ; who remarks that the sore was not *healed*, only *healing* ; that it once healed under Dr. Whitby's treatment and remained well for a year ; that it healed under Dr. Fell's treatment and remained well (though without disappearance of the tumour) for several months,—will hardly think Mr. Head has gained any advantage corresponding to the damage done by the severe salivation. This, time only can show. But the case as it stands, taking it under the most favourable aspect possible for Mr. Reed, tells very little in his favour, and it is clear that Mr. Head has been rather hasty in announcing the treatment to the world as remarkably successful.

Notes of other cases treated by Mr. Reed have been published by Dr. Ross of Farringdon Street.

None of them were cancerous: a female suffering from bronchitis, “took some powders, was severely salivated, several teeth fell out;”—a male patient with phthisis, “took some powders, and was salivated. He has since died;”—a pregnant woman with lung disease, “was severely salivated, and lost several teeth.”

It thus appears tolerably clear that Mr. Reed’s wonderful secret consists of the use of chlorine gas locally, and free dosing with mercury. Mr. Nunn has proved that in one case at least mercury was given in the form of calomel. A female with a swelling in her arm-pit, which Mr. Nunn did not believe to be cancerous, took some powders Mr. Reed gave her, and applied an ointment he also gave her to the swelling; “the result of the treatment was a most severe salivation.” The powders on analysis were proved to be calomel; and the ointment calomel, with some fatty material.

Surely enough has been said of Mr. Reed to prove that he is more dangerous to the public than others of his class, and possessed of even less ability. Early exposure has taken place, and in all probability, long before the two years which ordinarily bound the popular career of the cancer curer, he will sink into oblivion.

In conclusion, let me express the hope that the facts I have brought forward may serve as a warning

to the public not to hazard their lives by submitting to the experiments of amateur doctors, or to the slow torture of the secret remedies of any pretended curer of cancer. Dr. Fell is the only one of the order who has the faintest shadow of a claim to be the introducer of anything not previously known to the medical profession ; and I trust I have proved how egregiously he has failed both in removing cancerous tumours without pain, and in preventing a return of the disease.

How brightly does the conduct of the medical profession as a body contrast with that of its American members Pattison and Fell ; or with that of the black-visaged and black-coated amateurs Vriès and Reed. Jenner made known his discovery of the protective power of vaccination freely to all mankind, though he might have made an immense fortune had he practised it secretly. Simpson gave every possible publicity to his discovery of the anæsthetic properties of chloroform—and in this Jenner and Simpson did but follow the universal rule of their profession. Any medical man who came before his brethren with a secret method of treatment would be met by the general indignation of the whole body. The greatest publicity is courted in our hospitals. Every new remedy which seems likely to be useful is fairly tested. One man's experience is checked by the experience of others, and the knowledge so

acquired is made known freely for the benefit of suffering humanity. Yet we who act thus frankly and openly are accused by mysterious juggling charlatans who keep their vaunted marvels secret and trade upon them for their own gain, of allowing "violent prejudices" to actuate us against the reception of any new thing. Even the press at times joins in the chorus of the deluded public and the chuckling impostor. Only this month the medical profession has been exhorted in one of the daily papers "to exercise great caution and forbearance ere they unhesitatingly condemn the efforts made to cure or to arrest the steps of this frightful malady by means extraneous to those now almost exclusively used—the knife." "Surely," it is added, "we should not obstinately deny a trial to remedies less ferocious; surely we should do well to examine ere we denounce a milder form of treatment in a disease one of the most awful with which it has pleased the Almighty to afflict His creatures." This is the sort of language which sends hundreds of ignorant patients to the cancer curers. Yet enough has been advanced in these few pages to prove that those members of the medical profession who practise openly and fairly are certainly not less desirous than the dealers in secret remedies of discovering a cure for cancer; and as to the *mildness* of the means they adopt, the horrible tortures inflicted by the caustic

mongers certainly go far to prove the comparative mildness of the knife.

The medical profession most certainly has considered fully and fairly what are the relative advantages of the use of the knife and of caustics in the treatment of cancer. In France Dupuytren and Manec, then Canquoin and his imitators, led the way which Velpeau, Maisonneuve and others have followed much farther and more successfully than any cancer curer. In this country Brodie and Simpson, Stanley and Startin, have assisted their younger brethren in settling this important question, by pointing out, from the results of their own experience, cases in which caustics may be used with advantage, other cases in which it is a matter of doubt whether caustics or the knife are to be preferred, others in which the knife offers unquestionable advantages over caustics, and, lastly, others in which that surgeon best consults the comfort and welfare of his patient who rejects altogether both the knife and caustics, and trusts to general hygienic and medical treatment to relieve suffering and prolong life.

Nor has the profession been behind in the use of gases : carbonic acid gas, either alone or mixed with the vapour of chloroform, has been generally and extensively employed since Dr. Simpson made known its very great utility to his professional brethren.

Chlorine, also, has been largely used long before Mr. Reed tried it. In the form of lotions containing free chlorine, or in combination with soda, potass, or lime, it has been generally prescribed as a deodoriser. Other more effectual deodorisers, as the permanganate of potass, and various combinations of carbolic acid, have been used freely since attention has been drawn to their good effects by Dr. Angus Smith, Dr. Bernays, and Dr. Girdwood. Here the profession most certainly has learnt nothing from the nostrum dealers.

It is quite true that the professional mind at home and abroad has been for some years in a state of doubt or uncertainty as to the important question, Should cancers be removed? At one time it was the general rule of practice to remove them. Then the frequency of return after removal, and the rise of the humoral pathology, led to the rule only to remove them in exceptional cases; and many surgeons of experience followed the line of practice indicated at a former page in my lecture. Just now a marked change is taking place. The professional mind is in a state of transition. The transudation hypothesis is falling before the cellular theory. The belief that cancer is a disease of the blood is severely shaken by the vigorous attacks of Virchow, and the positive and visible demonstration he affords of the local origin of morbid growths, and the secondary

contamination of neighbouring parts and of the blood by extension and by absorption of the products of local disease. He has gone very far towards proving that the cells of the connective tissue (commonly known as cellular or areolar tissue) are the ovules of cancerous growths, as they are of all new cellular productions. We are still ignorant of the nature of the peculiar change or irritation which, in the first instance, alters a connective tissue cell into a cancer cell; but when once this change has taken place, and the altered cells begin to grow and multiply by division, we have clearly a focus both of local and general contamination—local, by imbibition of the fluid formed by the diseased cells into the healthy cells of adjacent tissues; and, general, by absorption of the morbid products through the lymphatics and veins. Thus the harder the tumour, the less likely to spread; the softer, the more likely both to spread locally and to contaminate the blood. The direct and necessary practical deduction for the surgeon from these views is, that all malignant growths should be removed in their earliest possible stage—as soon, in fact, as their nature is ascertained; and to this rule surgeons seem to be partially, though perhaps unconsciously, returning.

It requires the observation, and careful observation, of many years, and of many independent observers, to settle such a point as this; but a great deal has been

done to show that on comparing cases of cancer in the mass where removal has been practised, with those where the patient has been left without operation, that the average duration of life in the patient operated on is decidedly lengthened. No trustworthy data exist for making such a comparison with cases in which the tumour was removed in a very early stage; but my own experience is leading me to adopt the rule deduced from the pathology of Virchow. I have had several cases since my lecture was delivered in which I have excised growths which microscopic examination has proved to be truly cancerous, and in which no return has yet been observed. The time is obviously too short to speak of them as permanent cures; but the result has satisfied me that the rule of practice I formerly advocated may be advantageously modified in cases where the disease is in a very early stage. The operation in that case is a very trifling one,—perfectly painless under chloroform; and so little necessity does there appear to be to keep patients to their room, that I have among hospital out-patients allowed them to come backwards and forwards from their homes. Supposing the general health to improve, and the cause which led to the first change in the connective tissue cells should not operate again, then *removal* really becomes *cure*.

If this teaching of the greatest of living pathologists be true,—if the belief in the constitutional

origin of cancerous tumours is unfounded,—if the constitutional disease is entirely secondary, the morbid condition of the blood originating in, and being kept up by, a supply of hurtful ingredients from some diseased locality,—how hopefully may both surgeon and patient look upon the treatment of cancer in early stages, before the germs have spread into neighbouring tissues, before they or any irritating fluid have been conveyed to a distance. And, on the other hand, how fearful is the responsibility of the cancer curer who tampers with the life of the poor sufferer who has confided in his knowledge and skill. If he attempt to procure absorption of the tumour and succeed, he may produce the general contamination of the blood, of which the growth itself was erroneously regarded simply as an “outward and visible sign.” If he fail, he still gives time for the growth of germs, and extension first locally and then by absorption. If he employ caustics, he may be adopting the very practice of all others most likely to lead to a rapid and general development of cancer throughout the body, by hastening softening of the growth, and setting up irritation in neighbouring parts.

In conclusion, let me express the hope that the facts I have brought forward in the foregoing pages, may teach a lesson to the public. They may see how, year after year, dealers in secret remedies rise,

fall, and are forgotten—how selfish appear their motives—how delusive their promises—how false their assertions—how dense their ignorance—how terrible their mistakes, and how those who confide in them may be deceived, robbed, and tortured, even to the death. They may see, also, how, age after age, true medicine advances; slowly it may be, but openly and without mystery or deceit. They may see errors discovered, old practices reformed, and new opinions arise; even radical changes in fundamental principles and established rules of practice may be the work of a single generation. But all this is effected in the full light of day, amid free discussion, and by the concentrated observation of a large body of men of education and high scientific attainment. One surgeon originates something which he regards as a practical improvement. He makes known his own limited experience; it is instantly tested by hundreds of his compeers, and its true value or danger is soon established. How can a few isolated charlatans acquire experience which can only be obtained by the co-operation of thousands of independent and disinterested observers? If this be considered, it will be apparent that the public can only find true safety among men who forbid secrecy as socially dishonourable, morally wrong, and practically dishonest.

It may be asked, Is it not the duty of Parliament

to protect the public both from quack dealers in infallible specifics and from professional or amateur cancer curers? Members of the medical profession who think the educated ought to interfere in favour of the uneducated classes are met by the old cry of "No Monopoly!"; and "Free Trade in Physic!" is the cry of the day. It will, perhaps, be difficult to convince John Bull that any man who advertises a secret pill as a cure for every imaginable disorder, securing sound digestion and long life to those who only buy and take enough, ought to afford a guarantee to some Government board that he is not a despicable swindler—his prospectus a cunningly devised fooltrap—his certificates atrocious forgeries; or at least that the ingredients he vends are harmless, or not positively dangerous. The day may come when this protection may be thought desirable: but long before that time the necessity will be felt for inflicting some signal and exemplary punishment upon the designing villain, or the greedy ignoramus, who undertakes to cure diseases which have defied the skill of the medical profession—who keeps his plan of treatment secret—who extorts inordinate remuneration before treatment is commenced—who continues his extortions and his false promises amid the useless agony of the sufferers and the illusory hopes of their relatives. The obtaining of money under false pretences, if proved, would now meet

with its due reward in our courts of justice. In cases when death is greatly accelerated, an indictment for manslaughter might be applied with success. But as the *Times* said, when commenting on the "handy method" they have in France of dealing with the more notorious and mischievous quacks, "In all cases where agents have been employed productive of suffering without possible beneficial result, and that by persons who neither by education nor practice have a right to style themselves professors of the medical art, a sterner punishment might be inflicted with advantage."—*Times*, January 14, 1860.

Perhaps events may soon bring about some such salutary enactment as this without encroaching on public or individual liberty. In the mean time, exposure of his true character, of his system of payment, of the falsehood of his bold promises and his pretended CURES, is the only punishment that can be inflicted upon the CANCER CURER.

